

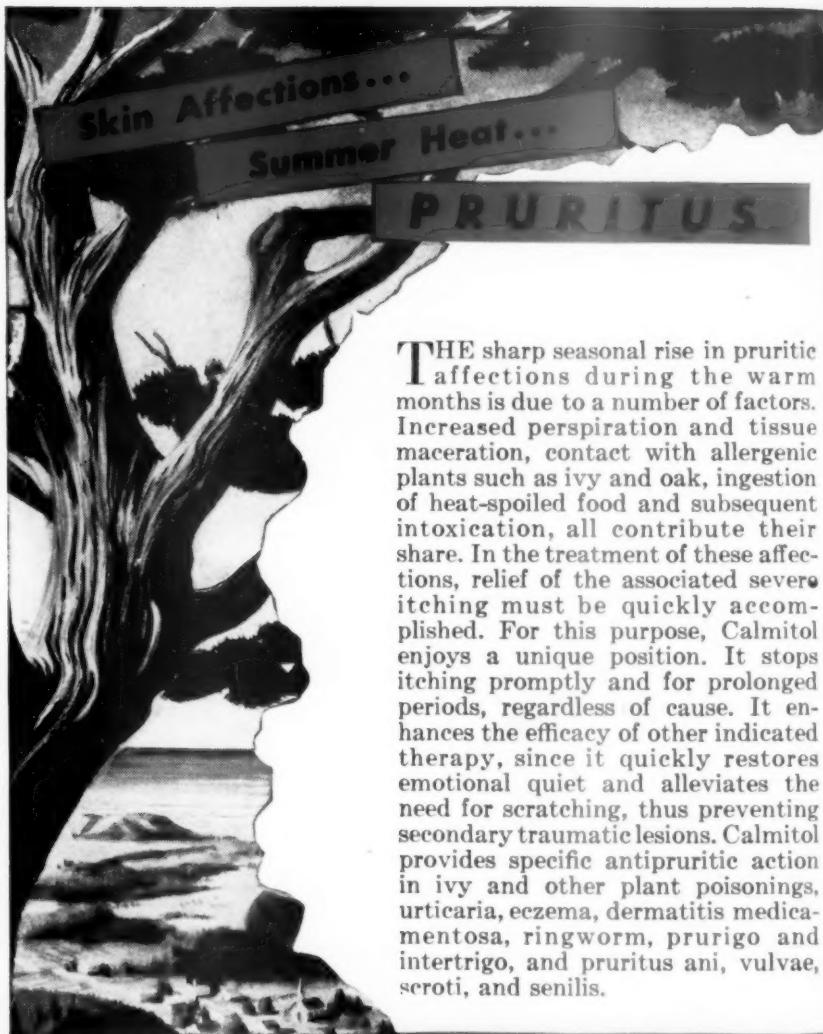
rt, especially
nicians
requently
titioners
regularly
ty occa-

Acetysali-
Phosphate
Trademarks

Y YORK 17

R.N. July 1946





Calmitol stops itching by minimizing transmission of offending impulses from cutaneous receptors and end-organs. Bland and nonirritating, the ointment can safely be applied to any skin or mucous surface. Active ingredients: camphorated chloral, menthol, and hyoscyamine oleate. Calmitol Liquid, prepared with an alcohol-chloroform-ether vehicle, is used only on unbroken skin.

CALMITOL
THE DEPENDABLE ANTI-PRURITIC

Thos. Leeming & Co. Inc.

155 East 44th Street, New York 17, N. Y.



-A JOURNAL FOR NURSES

NIGHTINGALE PRESS, INC., RUTHERFORD, N. J.

Contents

JULY 1946, VOL. 9, NO. 10

- 5 Debits and Credits
- 15 Science Shorts
- 23 New Start for Norway
Gloria Olson
- 29 Keeping Your Patient Cool
Anne M. Goodrich, R.N.
- 31 Malaria's Latest Antagonist
- 32 Why Nutrition Belongs in Nursing
Carolyn Valentine, B.S.
- 34 Male Call
Jo Brown
- 36 Reviewing the News
- 39 Public Health Gains in California
- 40 R.N. Goes to the Children's Zoo
- 46 Nursing the Polio Patient at Home
Louise Suchomel, R.N.
- 49 The Yellow Flag Flies Again
Ruth B. Scott, R.N.
- 52 Glass Plastic—Aid to Orthopedic Surgery
- 56 Books
- 88 Positions Available

On the cover: Official Norwegian Nurse's Uniform

Copyright 1946, Rutherford, N.J. Circulation over 100,000 registered nurses monthly. EDITOR: Dorothy Sutherland. ASSOCIATE: Anne M. Goodrich, R.N.; ART: Marjorie Pedretti.

"It'll Be D-P-T—or Nothin', Doctor!"



**He's a Smart Kid, Doctor—
even though he does deserve
the back of your hand!**

Imagine his knowing he'll get better protection with Cutter D-P-T because every cc. contains 40 billion proved Phase I pertussis organisms, all grown on *human blood*.

Pretty foxy of him, too, to pick the combined vaccine in which both tetanus and diphtheria toxoids are so purified that far more than a single human dose is supplied in each cc. Extremely high pertussis count and purified toxoids yield a vaccine so concentrated that your dosage schedule is only 0.5 cc., 1 cc., 1 cc.

Advantages of D-P-T (Alhydrox) over alum precipitated vaccines have also been established. Not only does it produce better

immunity levels, it presents less pain on injection because of its more physiologically normal pH. Persistent nodules and sterile abscesses are rare, rather than an expected contingency.

Maybe the kid's got something, after all—in "it's D-P-T or nothin', Doctor!"

Cutter Laboratories, Berkeley, California
Chicago . New York

CUTTER

Fine Biologicals and
Pharmaceutical Specialties



"I'm going to grow a hundred years old!"

*...and possibly
she may—for the
amazing strides of
medical science
have added years
to life expectancy*

● It's a fact—a warm, wonderful fact—that this five-year-old child, or your own child, has a life expectancy almost a whole decade longer than was her mother's. Not only the expectation of a longer life, but of a life by far healthier. Thank medical science for that. Thank your doctor and thousands like him... toiling ceaselessly... that you may enjoy a better life.



According to a
recent independent
nationwide survey:
**More Doctors
Smoke Camels
than any other cigarette**

E. J. Reynolds Tobacco Co., Winston-Salem, N. C.

This Month

		1	2	3	4	5
6	7	A firm friend month in month out			11	12
13	14				18	19
20	21				25	26
27	28	29	30	31		

Why not allay the inherent discomfort from that periodic day which marks the onset of regular menstrual pain? It's so easy when you rely on the quick, time-tested action of Anacin . . . the preparation containing medically proven analgesic agents. You'll find Anacin a good friend to know every other day in the month, too . . . for it is also excellent for relieving simple headache or minor neuralgia.

Ask for Anacin in your hospital pharmacy or neighborhood drug store.

The Quick-Acting Analgesic

ANACIN
ASA 325 mg. each

WHITEHALL PHARMACAL CO., 22 E. 40th ST., NEW YORK 16, N. Y.

Debits and Credits

Bargaining

Dear Editor:

The use of a State nurses association as a bargaining agent is in a very early stage in Colorado and I found the article "C.S.N.A. Takes the Lead in Collective Bargaining," [R.N., April] a very timely review.

NORMA HOLLOWAY, R.N.
LAKEWOOD, COLORADO

"A Word to the Wise"

Dear Editor:

The article "Should Married Nurses Work" [R.N., May] has both impressed and disturbed me.

I am a married nurse and have been helping out, part time, in a small hospital during the great emergency, and think I have been appreciated for the effort. However, what I should like to put across to the young single R.N.'s is the privilege some of the smaller hospitals have given the practical nurse as far as nursing is concerned.

I have heard criticisms from patients about nurses in general (judging all nurses by some dumb blunders of practical nurses). Many of these p.n.'s come into hospitals under false pretenses and their techniques and standards are poor.

I think you younger nurses should get together along with the State Board of Examiners and hospital personnel and set up a standard of rules under which the practical nurse may work at a hospital.

For instance:

They should not be allowed to wear a cap in the hospital.

On private duty, the patients should know when a practical nurse is the only one available for them.

Treatments and medications (especially hypodermic injections) should be supervised. After all, we trained hard and studied for three years while the majority of practical nurses have had about six-month courses.

Nurses' registries should be checked and rules set up for the registrar to comply with. I have seen

- Please do not send R.N. unsigned letters for publication. Your name will gladly be withheld, if you request it, but in line with R.N.'s editorial policy anonymous letters to the editor cannot be considered for use in the magazine.—THE EDITORS.

Triple aid in SKIN THERAPY

CAMPHO- PHENIQUE

(Phenol 4.75%, Camphor 10.85%
in an Aromatic Mineral Oil Base)

**combines Analgesic
Antipruritic and
Antiseptic Properties**

To promptly relieve the wide variety of minor skin irritations and injuries requiring treatment, many Doctors for years have used and prescribed Campho-Phenique Liquid Antiseptic Dressing. It works as a mild surface anesthetic to relieve itching and pain, combats swelling and secondary infection associated with

Eczema • Urticaria

Intertrigo • Athlete's Foot

Pruritus • Impetigo • Herpes

SEND FOR FREE BOTTLE

CAMPHO-PHENIQUE
Dept. RN-7, Monticello, Illinois
Please send me a free bottle of Campho-
Phenique Liquid Antiseptic Dressing.

Name

Address

City State



practical nurses on private duty asking and receiving R.N. fees.

So, girls, I don't think your troubles lie with the married registered nurse, but rather with the hospital-experienced practical nurse. It is up to you—keep the standards high!

MURIEL MURPHY, R.N.
BLOOMFIELD, N.J.

"No Time For—"

Dear Editor:

One problem we have in the hospital in which I am working is that we single girls feel the married girls should share the 3 to 11 and 11 to 7 shifts with us. So far, we single girls have been doing most of these shifts because the other girls say "We're married and want to be with our husbands." On the other hand, we figure we're single and have no husbands and never will if we continue to get pushed around by the married nurses.

VIVIAN SAVITZ, R.N.
PHILIPSBURG, N.J.

Spouses

Dear Editor:

Why shouldn't married nurses work? They are no different from single nurses. As far as having problems at home, don't we all have them? Yet our work doesn't suffer because it takes our minds off ourselves while we are helping others. I have been married seven years and worked off and on during that time. I have been happier when I worked, it gave me a broader interest.

My husband was in the service

For a
privil
camp
until
ways

Not
good
that v
sunsh

You
ing fo
regard
stands
ful of

As
"The
nature
at Nat
flavor
trols,

ity ask-

ur trou-
gistered
ospital-
lt is up
igh!
R.N.

he hos-
is that
ed girls
11 to 7
ngle girls
e shifts
"We're
ith our
nd, we
no hus-
ontinue
married

R.N.
J.

nurses
nt from
g prob-
ll have
t suffer
off our-
others. I
ears and
at time.
worked,
service



First one's a ker-flop!

For a city boy — especially one who's had few privileges — the first cold plunge at summer camp is liable to be awkward. But it isn't long until he takes to this new world with its new ways like a duck to water!

Not least among the things he learns are *good eating habits*. For camp directors know that well-balanced meals are as important as sunshine and outdoor sports to a child's health.

Youngsters are encouraged to develop a liking for many different kinds of foods. But — regardless of other changes — one requirement stands firm: every day, for every child, a *quarterful of fresh milk*.

As an experienced camp nutritionist puts it, "There is no substitute for milk." Milk is nature's most nearly perfect food. It's our job, at National Dairy, to help keep milk fine and flavorful — safeguarding, through Sealtest controls, its purity and quality.

Our job goes even further, though — for National Dairy Laboratories are daily engaged in finding ways, through research, to make milk and its products easier to serve, better tasting, and more beneficial than ever.

Dedicated to the wider use and better understanding of dairy products as human food . . . as a base for the development of new products and materials . . . as a source of health and enduring progress on the farms and in the towns and cities of America.



**NATIONAL DAIRY
PRODUCTS CORPORATION
AND AFFILIATED COMPANIES**

GAUZTEX

Please Doctor...
NO TAPE!

Who has not experienced the painful removal of conventional tapes from skin surfaces? Well may a patient say "Please...no tape!" when his injuries could be bandaged with a quality *cohesive gauze*.

There is no pulling of hair or skin, no damage to sensitive tissues when GAUZTEX is used. No pins, tying or tape are required; simply wrap GAUZTEX around the part to be bandaged and press firmly against itself. Order the 12" x 10 yard Professional Package, cut in widths desired, through your regular supplier.

Professional samples are available upon request.

GENERAL BANDAGES, INC.
531 PLYMOUTH COURT • CHICAGO 5, ILL.



and overseas. I was the second married nurse to work at our hospital and it wasn't easy to listen to the jeers of the spinsters saying "I'm glad I'm not married and supporting a husband." It was very unkind because we went to work thinking it was our duty since the need for nurses was great. The single nurses were merely jealous, so we overlooked their remarks.

Eventually I took another job and at this hospital 75 per cent of the private duty nurses were married. I never heard any of the doctors complain of inefficiency. In fact, more of the single girls took time off for sickness than we married nurses.

I'll stand up to any single nurse my own age and with the same amount of experience, and I'll wager I'll be just as efficient. Whether a married nurse should work is up to the individual and should depend on her own financial circumstances. If she has children, she should have someone responsible to care for them so she will be free from worry while working.

R.N., CLEARWATER, FLA.

Tuberculin Reaction

Dear Editor:

In the February 1946 issue of *R.N.* there were two incorrect statements concerning tuberculosis. One, that a positive reaction in children in a majority of cases was an indication of tuberculosis, and the other statement concerning the percentage of positive reactions among all adult groups tested.

[Turn the page]

second
hospit-
to the
g "I'm
porting
ind be-
king it
eed for
nurses
e over-

job and
of the
carried. I
ors com-
t, more
off for
rses.

the nurse
the same
ll wager
ether a
is up to
pend on
ances. If
ld have
for them
ry while

, FLA.

of R.N.
atements
e, that a
in a ma-
cation of
statement
f positive
t groups
he page]

New! Hospital-Tested!

JOHNSON'S BABY LOTION

(ANTISEPTIC)



Leaves a discontinuous film on the skin

Johnson's Baby Lotion is a smooth, white, homogenized emulsion of mineral oil and water, with lanolin and an antiseptic added.

The Lotion leaves a discontinuous film of micron-size oil globules on the infant's skin. This permits normal heat radiation; allows perspiration to escape readily.

Reduces incidence of skin irritations

When Johnson's Baby Lotion was used for routine skin care of thousands of newborns in test hospitals, attendant doctors reported far fewer cases of impetigo, prickly heat, diaper rash, other common miliarias.



JOHNSON'S BABY LOTION

(ANTISEPTIC)

Johnson & Johnson

FREE! Mail coupon for sample bottle!

Johnson & Johnson, Baby Products Division
Dept. 38, New Brunswick, N. J.

*Please send me, free of charge, one sample
bottle of Johnson's Baby Lotion.*

Name _____

Street _____

City _____ State _____

Limited to nursing profession in U. S. A.

Now! A NEW, BETTER, WHITER

Energine Shoe White!

Here it is—the wonderful new, whiter Energine Shoe White you've been waiting for! Actually makes dirt and smudges disappear—and, at the same time—whitens your shoes beautifully, with a fleecy white finish that's uniform from toe to heel!

Try this new, improved, whiter Energine Shoe White—and see for yourself what it does for your shoes! It's easy to use, goes on in a jiffy, and there's nothing that stays on better! Get the big bottle today.

Remember—Energine Shoe White does two things at the same time:

*Cleans
as it
Whitens!*



I think the *R.N.* is a very fine magazine and would like to see a correction of the above article in some future issue.

TERESA E. ADRION, R.N.

Mercer County Tuberculosis Board
ALEDO, ILL.

Dear Editor:

In the article entitled "Biologics—Medicinals That Fight Infection" the author made a series of errors in the discussion of the tuberculin test.

A positive tuberculin test does not tell when active tuberculosis is present in children. In my limited knowledge, I know of no instances where tuberculin has been used to treat tuberculosis. A statement that almost all adults will show a positive reaction to the test is, I believe, exaggerated.

As a health educator, it is very distressing to find gross errors in facts about tuberculosis being presented to 100,000 nurses. The matter would appear serious enough to warrant a published correction.

ELIZABETH E. MARKS

Peoria County Tuberculosis Association
PEORIA, ILL.

[Readers Adrión and Marks are correct in their objection to the wrong statement concerning "active tuberculosis." A positive tuberculin test merely reveals the presence of tuberculosis infection. The statement that almost all adults show a positive reaction, should have been modified to show variation in different parts of the country and in rural vs. urban areas. These correspondents are fortunate to be living in Illinois which has greatly reduced the incidence of tuberculosis.

fine mag
e a corre
in some fo

osis Boa

Biological
Infection
of errors
culin test
st does no
sis is pre
ted know
ences wh
d to tre
hat almo
ve reacti
aggerated
it is ve
ors in fac
resented
tter wou
warrant

losis Ass

Marks a
o the wor
positive t
lls the pr
ection. T
adults sha
l have be
n in diff
nd in ru
responde
g in Illin
ced the



Treat your hands to TRUSHAY

When hands are rough, the skin dry and cracked, there's not only the discomfort to consider—there's the danger of infection.

Before washing with soap and water, also before exposure to alcohol, antiseptics and other skin-drying agents, use TRUSHAY.

Creamy, peach-colored TRUSHAY guards against depletion of the skin's natural lubricant...helps keep the dermal tissue normal and unbroken. You'll be delighted with the fragrant softness that TRUSHAY gives hands and arms.

Bed-weary patients, too, appreciate a rub with TRUSHAY. It helps prevent pressure sores.

TRUSHAY

THE "BEFOREHAND" LOTION

Product of Bristol-Myers Company, 19NC W. 50th St., New York 20, N.Y.





FOR SOCIAL OR PROFESSIONAL USE

The Professional Stationery has the R. N. Insignia in blue and gold and your name and address is printed in black. The Social Stationery is exactly the same but without the insignia. The paper is a fine quality bond with a vellum finish. Just what you must have and for only a dollar!

\$1 for 36 sheets and 36 envelopes
with or without the insignia
(100 of each for only two dollars)

CORRECT - BEAUTIFUL - INEXPENSIVE

R. N. SPECIALTY COMPANY

15 East 22nd Street - New York 10, N. Y.

Gentlemen: Please send the following:

- 36 Letterheads and 36 Envelopes
- 100 Letterheads and 100 Envelopes
- With insignia; Without insignia

Print with the name and address below.
(Only Registered Nurses may have insignia)

Name _____

Address _____

City & State _____

cidence of the disease. Miss Manners in her reference to tuberculosis which is still used occasionally in certain localities, according to the National T.B. Association.—THE EDITORS.]

Hints

Dear Editor:

Here are two suggestions which the A.N.A. might take to help the nurses who pay their dues annually

1. Publish the amount the hospitals in New York take in annually on the 20 cent daily deductions for collecting the private duty nurse pay.

2. Organize a clinic to be paid out of the A.N.A. funds for the examination and treatment or medical diagnosis of the nurses who are members of the A.N.A.

Hotels, plants, and department stores maintain medical department for their employees, but nurses have to carry on without medical supervision. Is that fair?

IRENE CURRY, R.N.
NEW YORK, N.Y.

Dated

Dear Editor:

On page 65 of the February 1940 issue you mention the Crimean War of 1885. The Crimean War ended September 8, 1855.

ELEANOR WILSON, R.N.
CINCINNATI, OHIO

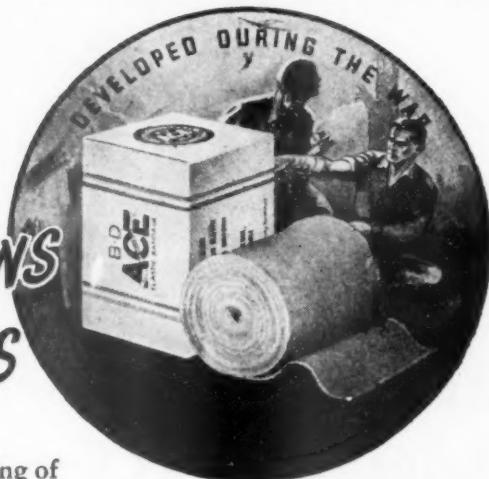
[R.N. should have verified the date which appeared in error in the War Department release on which the news item was based.—THE EDITORS.]

iss Mar
tubercu
illy in ce
o the Ne
THE ED

COMPRESSION BANDAGING...

with ACE
BANDAGES

FOR BURNS
AND
WOUNDS



There has been a reawakening of interest in the use of Compression Bandaging for burns (and wounds). Particularly is this true of physicians recently returned from Service—where they saw the life-saving, pain relieving results obtained with this technique.

By use of compression bandaging, body fluid loss is diminished with consequent reduction in loss of protein. Tendency to shock is minimized, pain is largely relieved, and the percentage of subsequent infection is generally lower than with other methods.

Pressure is equalized by the following procedures:

1. Apply sterile lubricant generously to site of burn or wound, and beyond.
2. Cover with sterile gauze dressings beyond the affected area in all directions.

B-D PRODUCTS
Made for the Profession

3. Add cushion of sterile absorbent cotton or mechanics waste, at least $\frac{1}{2}$ " thick, as evenly as possible.
4. Wrap an Ace Bandage over the entire dressing, considerably above and below the site of burn or wound, pulling the bandage snug. It is the even pressure exerted by the bandage over the cushion of cotton or waste that tends to reduce pain rapidly.

REFERENCES

War Dep't. Technical Bulletin—
March, 1945 TB Med. 151
Sumner L. Koch, M.D.
"The Use of Compression as a Surgical Principle in the Treatment of Injuries." Quarterly Bulletin—Northwestern U. Medical School—1943, Winter quarter.
Faxon—N. W. and Churchill, F. D. The Cocoanut Grove disaster in Boston. A preliminary account, J.A.M.A. 1942, 120: 1385

BECTON, DICKINSON & CO., RUTHERFORD, N.J.

Of Special Interest to Registered Nurses



**Amazing New Antiseptic Deodorant
Actually Checks Perspiration—Yet is**

Safe for Skin!

★ **Safely
Stops Odor!**
NO EMBARRASSMENT
—WITH COLGATE'S VETO!

★ **Safely Checks
Perspiration!**
VETO KEEPS YOU WELL-
GROOMED, DAINTY!

★ **Safe for
Skin!**
COLGATE'S VETO
IS ANTISEPTIC!

★ **Safe for
Clothes!**
NO ROTTED DRESSES—
With COLGATE'S VETO!

**DOES NOT ROT CLOTHES...Because of
Duratex, New Safety Ingredient
Found Only in Veto!**

Veto—Colgate's cream deodorant—is different from *any* deodorant you've ever used before! Because it contains *Duratex*, an exclusive new safety ingredient—Veto *does not rot clothes!* Veto is *safe* for any normal skin! Spreads on smoothly, rubs in easily, is *easier to use!* And Veto stays moist in jar—it never gets grainy or gritty! So use Veto regularly, to stop odor, check perspiration—*safely!* 10¢ and larger sizes. At drug and cosmetic counters everywhere.



APPROVED SAFE
FOR FABRICS
Better Fabrics Bureau

Colgate's VETO *Stays Moist in the Jar!
Never Gritty or Grainy!*

Science Shorts

In 1800, the average expectation of life was 35 years and the average woman of childbearing age had eight children, according to Dr. Wilson G. Smillie. In 1944, the ratios had changed so that the individual had a life expectancy of approximately 65 years but the average woman had only 2.2 children.

More veterans were hospitalized in V.A. hospitals during the first nine months of the current fiscal year than during the entire previous fiscal year.

In 209 institutions surveyed by the National Music Council, 187 were found to use music in the treatment of patients. Thirty of these considered it merely as recreation, and 23 gave music a place as a proven therapeutic force.

A report in the Naval Medical Bulletin points out that both poison ivy and poison sumac have three leaf groupings and smooth edges, while nontoxic Virginia creeper and scarlet sumac, with which they are often confused, have serrated leaves.

Daughters of foreign and mixed foreign and native parents who are themselves born in this country, are less apt to marry than daughters of

native-born parents, according to the Metropolitan Life Insurance Company.

There were twice as many eye injuries admitted to Naval hospitals in World War II as in World War I.

A report in the *Journal of the Iowa State Medical Society* tells of an entire house made into a pollen refuge for the use of a mother and child exceedingly hypersensitive to ragweed pollen. Storm windows were installed and sealed on all but two bedroom windows which were left open for a circulation of air through motor driven pollen filters. All flowers and family pets were barred from the house during pollen season, and the family physician reported mother and child escaped allergic reactions in spite of ragweed pollen counts exceeding 300 granules per 1.8 square centimeters.

Sulfathiazole has been put into chewing gum for local chemotherapy of the oral and pharyngeal mucosa.

Colonel Clyde O. Barney and associates of the Medical Corps, Army of the United States, call to the attention of the civilian physician the tremendous number of soldiers who

Properly directed, the current unrest can work for you. Let us guide you into new channels. Find the spot that appeals to you, one which offers an assured future in recognition of your ability and skill.

A few of our positions are:

INSTRUCTORS—(a) Medical and also surgical nursing instructors; 600-bed county hospital east of San Francisco; degrees required; \$265. (b) Nursing arts instructor; 150-bed approved hospital, San Francisco area; \$210. (c) Medical ward supervisor, Southern California; two years' college required; \$225.

SUPERINTENDENTS OF NURSES—(a) For 35-bed unit of larger county hospital, Southern California; \$225, maintenance. (b) Small privately owned hospital; Central California; \$275.

ANESTHETISTS—(a) Two positions, same hospital, 100-bed general approved institution, San Francisco Bay; \$275. (b) Catholic hospital, 100 beds; \$250 and maintenance plus \$3.50 for each call.

OBSTETRICAL SUPERVISOR—Progressive Catholic hospital, Southern California, plans to establish postgraduate course in obstetrics; requires M.S. degree; excellent salary.

CENTRAL SUPPLY—Nurse must know oxygen therapy; large private general hospital, coast resort city, Southern California; \$195.

SURGERY AND OBSTETRICISTS—(a) Surgery nurse, southwestern state school; \$240. (b) Two surgery nurses, 50-bed general private hospital, inland California; \$220. (c) Obstetrics nurses, Catholic hospital near San Francisco; \$170, maintenance. (d) Surgery, Southern California beach hospital; \$190, two meals.

GENERAL DUTY—(a) Several nurses, new V. D. clinic and 90-bed hospital, Los Angeles; all ambulatory patients; \$173, five day week; maintenance obtainable at \$30. (b) Graduate nurses for isolation and TB; \$205; 250-bed hospital; south of Los Angeles. (c) Seaside resort, Southern California; 200-bed hospital; nurses may elect to work 40 hours, \$175; 44 hours, \$185; 48 hours, \$195; full maintenance at \$45 in beautiful nurses' home. (d) Alaska; small and well equipped hospital; \$150, maintenance; fare refunded. (e) Arizona hospital; \$165, maintenance.

LABORATORY TECHNICIAN—Medically owned laboratory soon to establish blood bank; \$250 to start.

Business and Medical Registry
609 South Grand Ave., Los Angeles 14, Calif.
(Agency) Elsie Miller, Director

sustained abdominal wounds with fecal contamination and have survived to return to civilian life. These men are subject to severe intra-abdominal adhesions with possible later intestinal obstruction, and it is important that the civilian physician be prepared to make an early diagnosis.

German Air Force tests on altitude adaptation found that men could stay at least 11 days in the mountains at 7,000 feet while undergoing a great deal of exercise, taking good food and having adequate sleep.

An article in the *Journal of the Oklahoma State Medical Association* gives the approximate amount of caffeine found in soft drinks. Caffeine content per usual container of Pepsi Cola is $1\frac{1}{5}$ gr., Coca Cola $\frac{1}{2}$ gr., Sanka $\frac{1}{8}$ to $\frac{1}{4}$ gr., and coffee $1\frac{1}{2}$ to 2 gr.

A new machine has been perfected to "smell oysters" and detect and exclude the dead bivalves. The machine also detects spoiled shrimp, crabs, and other sea food.

The Army Medical Corps has reported on the control of respiratory infections in G.I. barracks by treating blankets and floors with a light coating of oil. The oil absorbs and anchors the dust and germs so that they do not drift about the room. It is claimed that less than 2 per cent of weight is added to the blanket in the process, and it requires only seven more minutes to treat the

nds with
ave sur-
fe. These
re intra-
possible
and it is
n physi-
an early

n altitude
ould stay
ntains at
g a great
ood food.

ul of the
ssociation
ount of
nks. Caf-
ntainer of
oca Cola
and coffee

een per-
nd detect
ives. The
d shrimp

es has re-
respiratory
by treat-
h a light
orbs and
s so that
room. I
per cent
blanket in
ires only
treat the



A
pleasant
way "to pay
the
fiddler"



When the price of dietary indiscretion is gastric hyperacidity and subsequent stomach upset or nausea, quick, pleasant relief is obtainable with BiSoDoL.

You may recommend this dependable antacid alkalinizer with the knowledge that its record of commendable performance has earned widespread medical acceptance.

BiSoDoL

POWDER • MINTS

WHITEHALL PHARMACAL COMPANY, 22 E. 40TH ST., NEW YORK 16, N. Y.



FOR SKIN CARE

LAMO (Nason's) is refined *lanolin* in a bland cold cream type of base, with all of the effectiveness of natural lanolin . . . but with the objectionable features eliminated.

LAMO is not greasy, gummy or stringy . . . has no unpleasant odor . . . is mildly medicated for skin protection and care. Send for complimentary sample 1-oz. tube.

TALIBY-NASON COMPANY
BOSTON 42, MASS.

LAMO
(NASON'S)

blanket with oil while laundering it. Once oiled, the floors do not have to be scrubbed; sweeping is sufficient.

With oxygen it is believed that man can safely fly at an altitude of 45,000 feet without pressure cabins.

Dr. John M. Rowe suggests the use of nylon for bone sutures when immediate movement of the part is desirable.

It has been estimated that British housewives wait on an average of one hour a day in food shop queues and, according to medical experts, 25 per cent of the ailments afflicting the British public are directly traceable to this cause.

Four Army physicians, reporting on the sensitivity of diphtheria to penicillin, found that nasal inhalations of 2,000 units at 15 minute intervals four times a day failed to reduce the duration of the carrier state of virulent diphtheria bacilli.

The average man gets 17 puffs to each cigarette, the average volume of smoke drawn in at one time being 33 cc's.

The *North Carolina Medical Journal* calls attention to the coincidence in careers among twins. Three sets of twins in the regular Army of the United States have had careers strangely parallel. One pair have the rank of generals; in the second pair one is a major and one a lieutenant colonel; and in the third pair both are majors. This in contrast to a

ering it.
have to
ficient.

ed that
itude of
cabins.

the use
hen im-
rt is de-

British
age of one
ues and,
, 25 per
ting the
traceable

reporting
heria to
inhalation
minute in-
ed to re-
ier state
i.

puffs to
volume
ne being

cal Jour-
ncidence
three sets
ny of the
careers
have the
ond pair,
eutenant
pair both
ast to a

WARTIME RESEARCH MAKES YOUR OLD FAVORITE



WHITER, BRIGHTER THAN EVER!

Yes, the white shoe cleaner you nurses vote your favorite, year after year—GRIFFIN ALLWITE—is now better than ever, thanks to wartime research.

The beautiful, snowy, rub-off-resistant finish you've always liked about GRIFFIN ALLWITE is even whiter and brighter today. And the new and improved GRIFFIN ALLWITE is still absolutely safe for all white shoes, leather or fabric, no matter how often you use it.

In the bottle or in the tube, GRIFFIN ALLWITE is more than ever your best buy today!

GRIFFIN

THE GREATEST NAME IN SHOE POLISH

Caution: **PREGNANCY**

PERHAPS, on no occasion must the physician select his therapeutic measures with greater care than during pregnancy and lactation. The laxative used for the relief of constipation during this period must not cause pelvic congestion. It should not appear as a laxative in the mother's milk. And it must be palatable to meet the exacting taste of the patient.

Incorporating white and yellow phenolphthalein in a chocolate base, palatability attains its highest expression in Ex-Lax. Truly, a laxative for the expectant mother—and for the entire family, too. The dose for adults is one or two tablets. Proportionately large doses are well tolerated by children.

Why so many physicians recommend Ex-Lax, when effectiveness, safety and palatability are paramount considerations, is explained in an informative booklet, "*What Modern Research Has Found Out About Phenolphthalein*." We shall gladly send you a complimentary copy and a trial supply of Ex-Lax. Our pharmacological and chemical research staff will be glad to answer any questions you may wish to ask.

EX-LAX, INC.

423 Atlantic Ave., Brooklyn 17, N. Y.

study in a German prison before the war which showed thirty pairs of twins represented at the same time.

Army doctors have reported the development of an effective vaccine against dengue fever. Experiments are being carried on in Hawaii and the United States.

The Lancet gives a report of the successful use of synthetic folic acid given by mouth and followed by a prompt hematopoietic response in persons with Addisonian pernicious anemia.

A report in the New England Journal of Medicine tells of the successful use of intravenous sodium pentothal anesthesia in neurologic surgery.

The Veterans' Administration has estimated that over 200,000,000 sheets, pillow cases, and uniforms were laundered and ironed in its hospitals last year.

In 1945, there were 220,554 more patients admitted to hospitals in the United States than in the previous year.

Lt. Commander Paul Ashley of the United States Navy feels that the best treatment for scarlet fever is human convalescent serum 50 cc's or more given intravenously within 24 hours of the appearance of the rash, followed by 30,000 units of penicillin on admission and 15,000 units every three hours until the temperature has been normal for five days.

ore the
airs of
time.

ed the
caccine
periments
ail and

of the
lic acid
ed by a
ense in
ornicious

ad Jour-
ccessful
entothal
ery.

ion has
000,000
uniforms
in its

54 more
s in the
previous

y of the
the best
human
or more
4 hours
ash, fol-
cillin on
s every
ture has



WITH Milk

An aversion to milk, or digestive upsets caused by the large, hard curds of untreated cow's milk, often make it difficult to insure adequate intake of this food so essential to child and adult nutrition. In such cases, "Junket" Brand Rennet Powder or Rennet Tablets "work magic" with milk. • By enzymatic action, rennet transforms milk into easily digested rennet-custards, which retain all the food values of milk — yet form small, soft curds in the stomach. • "Junket" Rennet Powder is already sweetened and comes in six natural flavors. "Junket" Rennet Tablets are not sweetened or flavored. Recommend either for making deliciously tempting rennet-custards. Full details and trial packages sent on request.



"THE 'JUNKET' FOLKS"
Chr. Hansen's Laboratory, Inc., Little Falls, N. Y.

"JUNKET" is the trade-mark of Chr. Hansen's Laboratory, Inc., for its rennet and other food products and is registered in the U. S. and Can.



Are these questions you'd ask about a baby food?

How are fruits, vegetables and meats selected? Experienced agriculturists select vegetables for their flavor and food value. Only tree-ripened fruits are used. Meats are constantly checked by government inspectors at the plant.

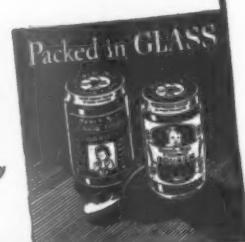
What techniques are used to conserve nutritive values? All cooking is done in the absence of air. Pre-cooking in stainless steel vacuum-pressure cookers and scientifically controlled processing in pressure retorts retain flavor and food values in high degree.

What controls assure uniform quality? Sample jars from each retort are incubated for two weeks at 98° F and 131° F. They are then tested for vacuum retention and pH. Total solids tests are run every 2 hours. In the test kitchen, flavor, color and consistency are checked. By such controls Beech-Nut quality is constantly maintained.



Beech-Nut STRAINED & JUNIOR FOODS

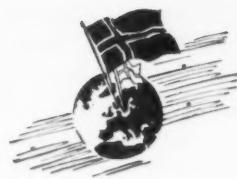
We invite your personal inspection or written inquiry
BEECH-NUT PACKING CO., CANAJOHARIE, N.Y.



Nursing Around the World:

New Start for Norway

by Gloria Olson



SIX YEARS AGO this June, Norway went into a more or less permanent "blackout." On that day, the last Cabinet meeting on Norwegian soil was held, and King Haakon and his Cabinet were forced to move their government to England where they continued the battle for the freedom of their country. From that time on, the outside world (which included many Norwegians who were stranded on foreign soil) could only surmise the true conditions of an occupied country.

One of these stranded persons was Sister Edith Anderson. She is head nurse of the Norwegian Public Health Service at 15 Moore Street in New York City. This center was estab-

postgraduate course in operating room supervision at New York Hospital. Norway at that time lacked facilities for combined theoretical and clinical postgraduate study, except at the institution of the League of Norwegian Nurses in Oslo where some theoretical instruction in hospital supervision was given.

After finishing at New York Hospital she traveled, visiting the Mayo Clinic in Rochester, Minnesota, and some hospitals in Chicago. Here is what she says about nursing in her native Norway:

"To understand nursing in Norway, you must first realize that we have a completely socialized health system, with legislation governing all our problems.

"Secondly, Norway is a very old country, and many practices and customs have been built up which, although obsolete, are traditional. For instance, midwives take an active part in our health program. They are not nurses, but receive a two year training in special schools in Oslo and Bergen. They work with the district health officer and nurse, and deliver all normal births in the home. At present there are about fifteen hundred midwives. The country is divided into



lished by the Norwegian Government to take care of its seamen and has been extended to include all Norwegian personnel working in the vicinity. Sister Anderson came to this country in September 1939, to take a

a thousand midwifery districts, with one midwife for each district. She is paid partly by the state and partly by the local government. From what I have seen and heard of your public health nurse-midwives, I know how alien and unscientific this must seem to you. However when I was home in 1938, we had the lowest infant mortality of any country in the world.

"Something else that I noticed here is that, although I hear nurses complain about working conditions and salaries, actually they are very well off. For instance, in the Red Cross Hospital in Oslo where I trained, we did all our own cleaning, dusting, and scrubbing of the wards which you detail to ward helpers. I guess the feeling is that it's all part of a nurse's work and lay people should not be allowed around the ill. I don't say we like it, but we accept it as part of the care of the patient. It is not good because it takes so much time from the patient, but it is all part of a rigid system that one feels helpless to confront.

"On the whole, I feel that Norway has a very high standard of nursing. Again this is due to the fact that we are a health-minded nation and the government takes an active interest in all the professions connected with keeping the country well. We have become aware through long experience that the health of the individual affects the work of the community.

"The only bad discrepancy that I can really see is the fact that we do not have state board examinations. We do, of course, have to pass our individual hospital examination, but

there is no uniform requirement for the country as a whole. We have the Norwegian Nurses' Association to which we find it advantageous to belong, particularly if you wish to secure a position in another hospital, but even this is not compulsory. To belong to it nurses must have graduated from a recognized hospital, but they can be employed by any hospital without belonging. And although, as I have said, the general standard of nursing is high, registration would certainly be a tremendous step in the advancement of nursing."

In contrast to Sister Anderson, whose opinions on Norwegian nursing are formed by what she knew before the war, is Sister Edle Oerwig who has been in this country about four months. She came here with her husband and is also working at the Norwegian Health Office.

In 1940 she was working in London, as a dress designer. She was called back to Norway for conscription and as dress designing was considered a non-essential industry, she decided to enter nursing. She trained at the "Haukland" Hospital in Bergen which is the second largest city in Norway. It is a public hospital administered by the County of Bergen. When the Germans came, they requisitioned it for German soldiers. The patients were ordered to "move out" with no regard as to where they went as long as they left.

Sister Oerwig says she entered nursing "because it was, I thought, the nearest thing to the type of work women do in their homes.

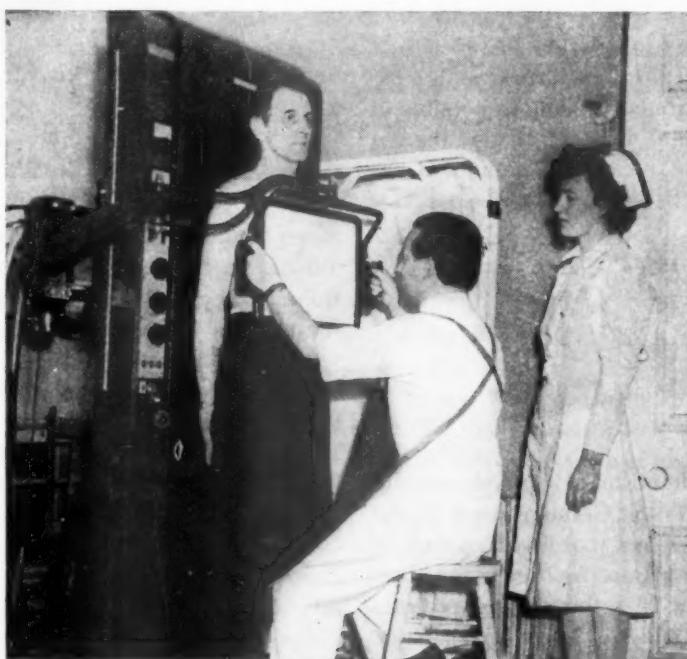
"With the coming of the Germans,

many of the graduate nurses escaped to join the Norwegian forces in the foreign countries. Our supervisors and nurses at home were doubly taxed, for they all joined the underground movement as a matter of course. This meant not only teaching the students, and resisting the Germans' plan to nazify nursing, but trying to help our own people as well, by saving them food, and getting doctors and people outside the hospital, medicine and bandages."

Norwegian medics and nurses were frequently employed by the Underground.

"We had many ingenious devices to combat the Germans," R.N.

learned at the Norwegian Press and Information Service. "In Oslo, the prisoners who became too sick to stay at the prison or who successfully feigned sickness, were transferred to the prison ward at Ullevaal Hospital. The Germans had an agreement with the hospital authorities to pay for ten days' hospitalization. One doctor in particular deserves outstanding credit for her work. Her name is Dr. Ingrid Saeves. When these prisoners were transferred to the hospital, she called the German authorities and had a dictaphone ready to record the conversation. She then asked the Germans if their agreement still held good in regard to prisoners. They said



Public health nurses are being trained in fluoroscopy as part of national T.B. prevention and health education campaign.

it did. So it was within her authority to transfer prisoners to the civilian ward after the ten-day period when the Germans were no longer paying for their hospitalization. Then it was a simple thing to get civilian clothes and while some decoy engaged guards in conversation, to walk out the main gate. This device was used time and again, but the Germans never caught on to it."

Nurses were largely responsible for keeping members of the Underground informed while in the hospital. Through secret contacts they secured radio receiving sets and hid them in the toilets in the hospital. In this way B.B.C. were heard—and the Germans never found this out either.

Another ruse of the doctors and nurses was to keep the prisoners that could not be transferred to the civilian department as long as possible in the hospital, in order to give them a chance to escape. Sometimes drugs



were administered hypodermically just before the Germans came to the wards to select those well enough to return to prison. As they made their inspection, they found many patients delirious and with high fevers. They never learned that this was only a temporary measure and that the fever soon subsided.

Another time a nurse allowed herself to be hit over the head and knocked out, in order to make the escape of a prominent saboteur look realistic.

With all this, pre-war nursing standards were maintained as much as possible. The entrance requirements were not lowered, and the curriculum was pretty much the same, with a few changes. Students were given a more extensive program in first aid and the

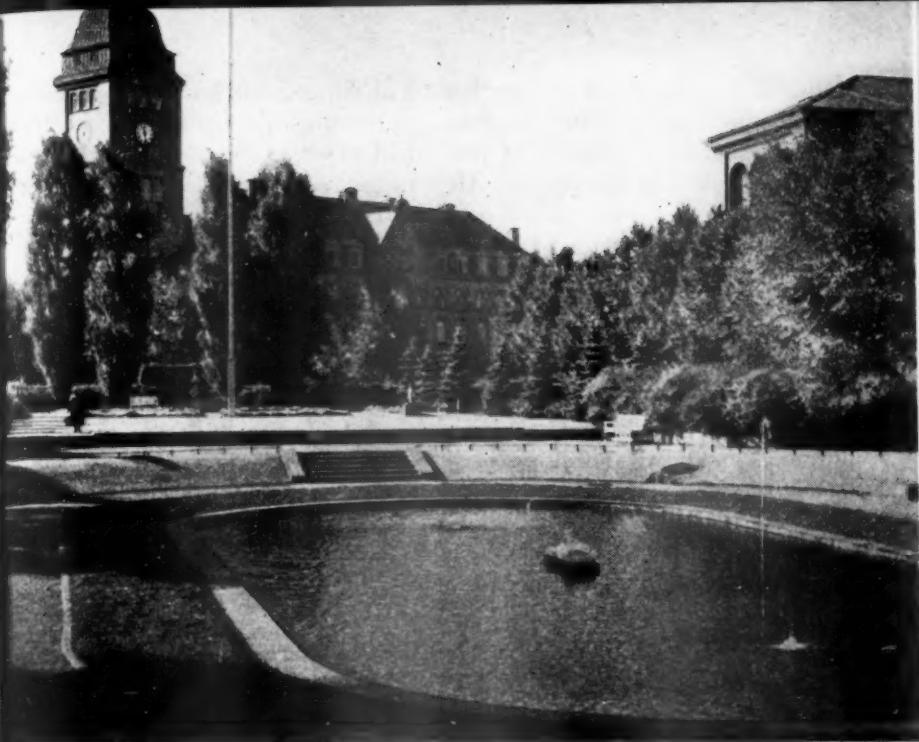


care of military disease and wounds. Whatever they lacked in theoretical training they made up for in practice, for most of the actual nursing care was shifted to the students.

Backbone of the nursing profession is the Norwegian Nurses' Association. It was established in 1912 and at present has about 3,500 members. Working closely with the Surgeon General of Public Health who has control of all doctors, dentists, nurses, midwives, and hospitals, it has standardized the general requirements of nursing and raised the educational facilities and living conditions for nurses. There are over 4,000 graduate

nurses
them
nurses
attached

Entr
high so
edge o
usually
course
of age
During
applican
most o
cepted
with a
month
cal in



Norway's hospitals are spacious and modern but, since the Nazi occupation, lack medical and surgical supplies and other equipment. Nursing standards are high.

ounds.
retical
actice,
g care
fession
iation.
and at
mbers.
surgeon
no has
nurses,
stand-
ents of
ational
ns for
aduate

nurses in Norway at present. All of them have trained in one of the 30 nurses' training schools which are attached to hospitals.

Entrance requirements include a high school education, with a knowledge of a foreign language (which is usually English as it is a compulsory course for seven years), twenty years of age, and an aptitude for nursing. During the war the quality of the applicants was so high that only the most outstandingly fitted could be accepted. The course covers three years with a preliminary period of three months for orientation and pre-clinical instruction. Theory and practice

is divided but if anything the emphasis is on practical instruction in the wards. Students live in the school and are under a very rigid code.

In 1938, a law was passed limiting the nurses' working hours to eight, with one day off each week. During the war, this could not always be enforced.

After graduation, nurses are permitted to work wherever they choose, but their choice is limited by the number of nurses already in that field. If, for instance, a graduate chose public health nursing and if this field were overcrowded, she would be put on a waiting list and at

the same time be asked to state her second preference. The Surgeon General controls distribution of personnel in public health nursing. He does not, however, have control over the employment of nurses by private physicians or companies.

During the war, nurses were required to remain at their training hospitals for one year after graduation.

Salaries of nurses are not high. Sister Oerwig received 150 krona, plus room and board. This is approximately the salary of a typist or clerical worker in the U.S.

Now Norway is free again. The problems that she faces are many. The activity of the public health service was, with the shortage of nurses, doctors, drugs and equipment, limited. A report which was secreted out of Norway indicated that the majority of the people were suffering from acute malnutrition. An investigation of the nutritive value of rationed foods showed that the diet of children



between six and seven was lacking about 370 calories of the normal peacetime diet while the diet of people over twenty was minus 1,430 calories.

Medical supplies were completely exhausted by the Germans, and even today there is a shortage of much needed X-ray machines and other med-

ical, nursing, and hospital equipment.

Housing conditions have gone from bad to worse and at present are one of the biggest problems.

The incidence of diseases will naturally increase under such conditions. Diseases of the gastro-intestinal and nervous systems and those due to lack of sanitation and proper hygiene show the most marked rise.

DISEASE	1938	1942
CASES	CASES	CASES
Diphtheria	187	8,349
Scarlatina	3,964	14,003
Gastroenteritis	23,672	72,341
Scabies	9,605	37,461

The Quisling government forbid any official discussion on the state of the public health which "had improved so marvelously under the new order." Protective measures were introduced quietly by the health officer of each district to check the spread of the diphtheria epidemic which seemed by far to be the most important one in Norway during the occupation. A total of fifteen thousand persons were vaccinated before the toxoid ran out.

The incidence of new tuberculosis cases was not high but the flare up of old cases was considerable. The government, together with the very active National Association Against Tuberculosis, has ordered that every man, woman and child be fluoroscoped. Public health nurses will be trained in this work.

During the occupation, the Norwegian Nurses' Association was placed under a Nazi woman who cared little about nursing. This was be- [Continued on page 86]

partment.
the from
are one
will nat-
ditions.
nal and
to lack
hygiene

942
ASES
3,349
4,003
2,341
7,461

forbid
state of
ad im-
the new
were in-
an officer
spread of
which
import-
the occu-
nousand
ore the

reulosis
re up of
the gov-
very ac-
Against
at every
fluoro-
will be

the Nor-
n was
an who
4. This
age 86]



Keeping Your Patient Cool

by Anne M. Goodrich, R.N

CARING FOR THE SICK in hot weather can be a trying experience for both patient and nurse, particularly if either or both of you dislike the heat. However, summer offers many compensations and advantages in keeping the patient comfortable and happy. The windows may be left open and the outlook for the patient up in a wheel chair encourages him to want to get well and go out-of-doors.

Even on the hottest days patients may be encouraged to feel cool by a combination of psychological factors and physiological care. First and foremost under the psychological approach is the appearance and attitude of the nurse. If we look hot, bothered, and uncomfortable we tend to make the patient overly aware of the heat. Although it is not always easy to appear cool and unruffled while giving extensive bedside care in hot weather, we will make some progress in that direction by doing things more slowly and planning the day's work so as to eliminate unnecessary steps and exertion whenever possible.

A spotlessly clean, uncreased uniform is of paramount importance in looking cool. With present day shortages in material this is not always

easy to accomplish. However, these same shortages have encouraged wearing of the short-sleeved uniform—cool for summer dog days. Although some hospitals frown upon short sleeves, sharkskin, and seersucker, many visiting nurse associations have adopted blue and white seersucker uniforms with short sleeves for summer. They may not look as trim as the standard article, but their added coolness and comfort and ease of laundering make up for the lack of stiff-starchiness that has been the trademark of the professional R.N. The most important factor for summer attractiveness is to wear a uniform which may be



easily laundered and changed every day. The summer uniform should also have a cool appearance and be loose enough to be comfortable for the wearer.

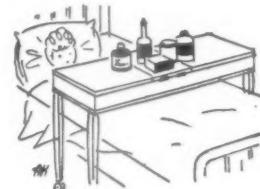
It goes without saying that the nurse working in the summertime must be especially careful about her own personal hygiene. A daily bath or shower before coming to work is

routine with all of us, and a tepid or cool shower in the evening can be an invaluable morale lifter after a hot day's work. Be sure to keep on hand, and use without fail, whatever deodorant or anti-perspirant you like best. Toilet water or light colognes are refreshing and better than heavy perfumes during Summer. Most nurses who perspire freely find that they feel and look cooler if they forego heavy makeup and face powder, and concentrate on a becoming light shade of lipstick during the summer months. Even the smallest of nurses' caps keep air from the scalp and cause excessive perspiration in hot weather, so frequent shampooing will keep you comfortable and fresh and dainty too.

The psychological approach to your patient's surroundings is important in making him feel cool. If you are caring for a patient in the hospital, your ability to change the surroundings is, of necessity, limited. You can, however, be sure that he is not looking into direct sunlight, that the shades are pulled so as to keep the sun out of the room, and that the bed is arranged so as to allow for the maximum circulation of air without putting the patient in a direct draft between door and window. If you are caring for the patient at home, you have more scope in rearranging his surroundings and placing the bed in the ideal position to catch the vagrant breeze and allow for a view of outdoors and green trees, if they are available. You will also find that removing

heavy draperies from the windows and keeping fresh flowers in the vases will give an illusion of airy coolness to the room.

Of course, the patient's condition and the disease from which he is



suffering will have a marked influence on the nursing care that may be given, but with your doctor's permission you will find that a cool sponge of alcohol and water is more refreshing than a hot bed bath. During the summer months a back rub can have a two-fold purpose. Not only will it stimulate the circulation but, after applying vigorous friction for this purpose, try smoothing alcohol on gently and slowly and following it by a generous application of powder. Then let the patient lie on his side or on his stomach for a few moments before turning on his back again. Women patients may enjoy a back rub with their own favorite toilet water instead of alcohol. Don't forget that alcohol or cologne applied to arms and legs have a cooling effect too.

It is especially important to change bed linen frequently and, if clean linen is not available, the nurse may find that keeping two sets of both bottom and top sheets and changing back and forth several times a day may give the illusion of comfort obtained by a newly laun-

windows in the of airy condition which he is

iked in that may or's per a cool is more th. Dur- back rub pose. Not circulation friction hing al- and fol- clication patient lie- ch for a g on his may en- own fa- alcohol, cologne have a

stant to and, if ple, the ing two op sheets in several usion of ly laun-

dered sheet. Unless the patient's condition prohibits it, get permission to remove the rubber draw sheet. The cotton padding generally used as a cover to a mattress in the home adds to, rather than subtracts from, the patient's coolness and comfort.

Urge your patient to keep as quiet as possible. If his condition permits, however, occasional change of position will allow different parts of the body to come in contact with the air and will tend to make the patient feel refreshed. Bed patients are especially susceptible to respiratory infections and pneumonia, so avoid using an electric fan turned directly on the patient or placing the bed in

a draft. The most effective method of airing a room with an electric fan is to place the fan in the center of the window facing toward the room. Or, if the inside of the house is cooler, you might place the fan on a table or chair in the doorway facing into the room, but not directly on the patient. A cake of ice in a pan may be placed in front of the fan and will cause a room temperature drop of several degrees.

Nutrition plays an important part in the patient's comfort and welfare during hot weather. Again, the diet prescribed by the physician must, of course, be the nurse's guide in preparing the [Continued on page 72]

Malaria's Latest Antagonist



When quinine sources were cut off suddenly at the beginning of the war, the United States was faced with an immediate and serious threat to health. Malaria, the devastating malady, had the power to disseminate armies with a speed almost comparable to an atom bomb. But, science went to work and the story of atabrine and how it saved millions is a part of medical history.

But medical workers and scientists were not completely satisfied and work on better and more effective antimalarials continued at an accelerated pace. Every conceivable substance was examined, some suspected of having antimalarial activity, others suggested by interested persons, and still others that had a definite basis for further study. In all, 14,000 substances were subjected to trial but it was not until the 7,618th was reached that the investigators found one that they deemed worthy of further study.

The Germans had made this same substance, chemically known as a member of the 4-aminoquinoline series, and they had even patented it as 7-chloro-4- [Continued on page 76]



Why Nutrition Belongs in Nursing

by Carolyn Valentine, B. S.

TWO YOUNG STUDENT NURSES were discussing the profession they had chosen. "But," wailed one of them, "I never thought I would have to be a *cook* when I decided to enter nursing."

Unfortunately, this feeling is prevalent among some students, and with some graduates, too. But, why not consider the entire picture of dietetics in its application to nursing?

When an instructor of nutrition or dietetics emphasizes the need for proper selection, preparation and arrangement of foods, she has not thought of turning a group of nurses into experienced cooks. She is trying to give a full and complete picture of body maintenance, all that it involves, and what it can and should mean to the future nurse. Intelligent handling and care of the food is just as important as being able to dash off a list of high protein foods, vitamin-rich edibles or purin-free substances.

The nurse is the dietitian's right hand, for to her falls the duty of checking the trays or special diets. She cannot do that unless she has the benefit of sound training in *all* phases of nutrition and dietetics. Foods must be processed before they are served and, much as you may dislike the me-

chanics of this preparation, it must be done for it completes the process of putting nutrition to work.

When a full diet is employed, it is usually in cases of those who are incapacitated and confined because of accidents, rather than illness. To look upon these diets as "normal," and therefore in need of no thought or care, is to sidestep a fundamental nursing duty. These patients, either at home or in the hospital, require treatment, and a large part of the prescribed care is to place the body in the best possible state of health. In fractures, or other cases that require tissue healing, proper and well balanced diets may be the only therapy that is used. Therefore, the food should be prepared and served with as much thought as the most complicated special diet. Yet, without an understanding of the need for a so-called normal diet, it may be served in an unattractive slipshod manner with no thought to its therapeutic qualities.

In a similar manner, a high calorie diet may appear to be an easy one to prepare. But usually the patient who must follow this regimen is in need of an incentive to eat the increased amounts. Often he is the finicky type

and tries to resist the mere subject of food. Here then is a place for ingenuity, thought, and extra care in service and preparation. Little children who may have some metabolic disturbance in which increased energy is needed, might be tempted to eat the food on the tray if a simple toy is placed upon it, a face drawn upon the boiled egg, or if a flower lies beside the plate. These things take a



little time, but if the food is eaten it will contribute to the well-being of a body that for some reason lacks the proper nutrients.

When a diet is rigidly restricted, as in salt-free, liquid, or semi-liquid, it tends to lack all interest for the patient. Perhaps the student nurse will become more interested in this type of feeding for she may feel that it is really a "diet." Such restricted fare needs thought too, for it usually lacks the contrasting colors which all of us enjoy seeing on the plate. Also, taste buds are not stimulated by the monotonous repetition of the allowed foods. Here again is a challenge to the clever and resourceful nurse for she can make the otherwise uninteresting fare an event. In home nursing this is possible by utilizing attractive dishes that give color and variety. In the hospital this is seldom possible, but again, a touch of color, or perhaps serving the dishes in courses, will help to break the monotony of the diet.

There is no reason for assuming that because of limits placed upon these diets they must be served in all their drabness and unattractiveness.

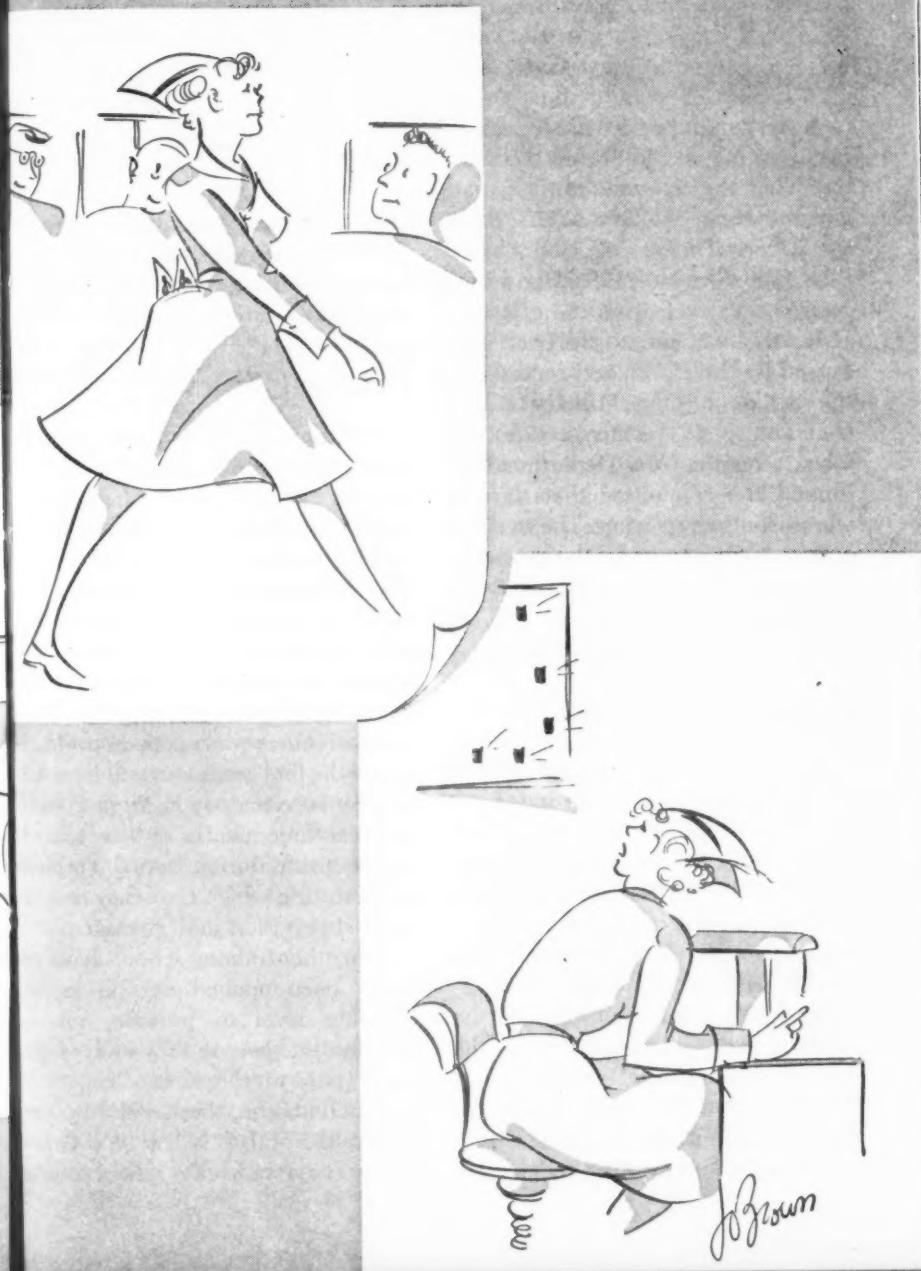
In hospital nursing, aside from the training received in the dietetics laboratory, the mechanics of food service are not too closely allied with nursing, *unless* the facts learned in the classroom are mentally carried to the floor and applied to the total scheme of healing. Even if the diets are prepared in a distant part of the hospital and sent to the floor without consultation or explanation to the nurse, they should be looked upon as another type of medication to help the patient to a speedy recovery—and served with this in mind.

The picture is clearer in home nursing. Here the nurse is responsible for the trays of the individual and she owes her patient the best that she can produce in all branches of her art. Is it fair to serve an ill person with a soft and watery custard that would have no appeal for a person in good health? If the simple rules of egg cookery are observed, a plain custard can arrive in the sick room as a well-formed, nicely browned dish that will tempt the eye—and the appetite. Yes, this is cooking, but think of it rather as applying the knowledge of cookery as another tool that will help the patient. A nurse will not hesitate to learn other manual arts because who knows that such training and occupation will help her patient. Why not use cookery to this same end?

Public health nurses soon learn that a complete knowledge of foods is a definite asset in their work. They face almost all [Continued on page 80]



"Male Call"



Reviewing the News

Requiem

A forgotten piece of legislation came up before the Senate the other day when the chairman of the Senate Committee on Military Affairs, Senator Elbert Thomas of Utah, asked that Calendar No. 129, House Bill 2227, be stricken from the calendar. H.R. 2227 was the Nurse Draft Bill. Passed by the House and reported to the Senate by the Military Affairs Committee, no further action was taken after the War Department informed the committee that the bill was no longer necessary. The Senate's action does not revoke the proposed draft, but the bill, together with all other legislation not enacted, will die when the 79th Congress adjourns.

Legal Opinion

Business and industries in the State of Washington are protesting a recent law to limit women to eight work hours in any one day. The employer group maintains that such an order is illegal on several grounds, that it requires replacement of women with men in many occupations.

Washington State nurses await the outcome with interest, as it is the opinion of the legal counsellor of W.S.N.A. that the order applies to them. Limiting the women's work day to eight hours with a regular 40-

hour week, the law allows work on the sixth day at time-and-a-half for a maximum of eight overtime hours permitted in any one week.

Practical Nurses

A significant development in supplying nursing care for the people of Canada is the new nine-months course for practical nurses recently opened by the Canadian Vocational Training School in Toronto. The course is open to ex-service women only, though it is expected to be increased to include non-service applicants in the near future. The nine-months' course was opened on March 4, and the first graduates will be available for service early in August, since the final three months of their schooling is given during actual employment, during which time they still receive supervision and guidance.

Two other training schools have recently been opened on the undergraduate level to provide nursing care for the people of widely separated parts of the globe. The Near East Foundation, the Greek Ministry of Health, and U.N.R.R.A.'s Greek Mission have opened a school to give



30-months' training, followed by supervised work for a six-months' period to provide health service in the Aegean Islands. On the other side of the world, a nursing school has been set up under the auspices of the N.N.C. to train native nurses on the Island of Guam.

In New York City, John F. McCormack, president of the New York State Hospital Association said that "increasing opportunities in private industry and businesses and in health protection programs point to employment of more and more nurses in the near future. The practical nurse should be brought into the picture in every possible way."

Uniforms

Nurses' uniforms may soon become more plentiful but higher in price, due to O.P.A. action removing them from a list of restricted price items. The action is taken in an effort to stimulate production of prewar staple goods by allowing manufacturers to add increases in labor and material costs to their present price ceilings. The new ruling applies mostly to items of cotton apparel, including, in addition to nurses' uniforms, utility aprons, children's playsuits, and doctors' gowns.

Award

The War Department last month issued a citation for Meritorious Civilian Service to *R.N.*'s editor. The commendation reads in part: "As information specialist and by unusual under-

standing, intelligence, and ability, Dorothy Sutherland succeeded in obtaining material portraying Army nurses in the field during their busiest and most trying times. She exhibited great tact and diplomacy in dealing with professional personnel and her efforts and success in interpreting nurses and doctors was of an outstanding nature. Through her constant efforts, Miss Sutherland contributed materially to the successful reporting of Army nurses' activities in the North African and European Theatres of Operation. Her loyalty, sincerity, and superior performance has brought credit to herself and to the Medical Department of the United States Army."

Miss Sutherland obtained a leave of absence from the magazine in order to serve some 15 months overseas as war correspondent with the Army Nurse Corps.

Enrollment

Western Reserve University School of Nursing in Cleveland, in addition to its collegiate course in nursing, has resumed its enrollment of students in



the undergraduate basic nursing course. The three-year course was discontinued at the end of World War II.

Because of the continued shortage of graduate nurses in both hospitals and public health agencies, Western Reserve has decided to accept high school graduates who are in the upper third of their classes and who pass the aptitude tests of the school of nursing. Students for the basic course will be admitted for the winter term which starts September 30, 1946, and upon successful completion of the three-year course they will be given a diploma in nursing by the school and be eligible for admission to State board examination for registration in Ohio.

Cadet

While the admission of student nurses under the Cadet Nurse training program was closed as of October 1945, the existing courses will not be concluded until the fiscal year ending June 30, 1948, when the last of the Cadets now enrolled will complete their training and graduate.

To carry on the program for the

Wanted

Will graduate nurses, whose mothers or younger sisters are also nurses, send us their names, addresses, and a few autobiographical facts? We are looking for a family team around which a story may be developed.—THE EDITORS.

students now in training, \$16,713,000 was asked for in the budget submitted to Congress by President Truman in January. Testifying before the House Appropriations Committee, Miss Lucille Petry stated that economies had



been effected which would permit the program to function with \$16,306,548 instead of the amount originally requested. The committee and the House rounded the amount off to \$16,300,000 and stated that it "expects that there may be substantial savings . . . because of drop-outs which may occur more rapidly than the U.S.P.H.S. anticipates."

There are at present 104,000 Cadets still in training under the Bolton Act, and graduations through June are expected to total 38,000, Miss Petry told the committee.

New York City's Health

Climaxing a period of various activities pertaining to medicine and health, New York City's mayor has ordered a city-wide health study to determine the need for improvement and expansion of the various activities under the Health Department. The study [Continued on page 60]

713,000
submitted
human in
the House
Miss Lu-
nies had

Public Health Gains in California



WHEN PUBLIC HEALTH nurses in one region of a State work for economic gains through their professional nursing association, and in another section through a labor union, comparison of the results obtained should be significant as well as enlightening. That is what has happened in California—the public health nurses of the Los Angeles County Health Department working through C.S.N.A., and those of the City of San Francisco working through the C.I.O.

The table at the bottom of this page shows what the two groups asked for and what was granted.

At the request of the Bureau of Public Health Nursing of Los Angeles County, C.S.N.A. surveyed public health nursing in that area, reported their findings in April to the Chief Administrative Officer of

Los Angeles. The report showed an excessive amount of work and responsibility, low pay, and consequent high personnel turnover. The association then asked increases as shown on the chart. Although the gains were not entirely as requested, they do show pay rises of from 15 per cent in the lower brackets to 17 per cent in the top categories.

Next year, the C.S.N.A. will approach the County again and it is hoped that further gains may be made at that time. Vera S. Johnson, assistant executive director of C.S.N.A. who handled the difficult job for the public health nurses, says she believes the current increases—effective this month—will pave the way to improvements in the economic status of all public health nurses in the County and eventually throughout the State. [Continued on page 54]

Health
various ac-
cine and
mayor has
study to
rovement
us activi-
partment
page 60

TITLE	C.S.N.A. Employment Schedule Recommended	C.S.N.A. Asked	Los Angeles Board Granted	C.I.O. Asked	San Francisco Board Granted
Public health nurse	\$195-245	\$211-259	\$211-259	\$200-250	\$190-230
Supervisor	245-290	246-303	246-303	255-295	230-290
Assist. Director of p.h. nursing	325-385	319-395	303-375	300-350	290-330
Director, p.h.n. (large agency)	400-500	395-489	355-440	400-500	330-400



RN

GOES TO A CHILDREN'S ZOO

One of nursing's most unique assignments is that of New York's young, attractive Corinne D. Johannson, R.N.—official "zooperintendent" of the Children's Zoo in Bronx Park. Starting in 1941 as staff nurse for this unusual project in child education, Miss Johannson is now manager-director of the Zoo with a staff of assistants and keepers under her. The zoo is famous for its success in building child's confidence. Friendly farm animals of familiar nursery tales are brought out into the open "ring" where children may play with them freely and safely.



00
York's
cooper-
1941 as
hann-
stant
build-
nursery
a may
Corinne Johannson's special pet is Deacon, a talking crow! Adults are startled by his greeting but youngsters answer his cheery "Hello" and accept him as part of the fairybook come to life which is the Children's Zoo. [Turn the page]



"Children and animals should make friends when both are young." Miss Johannson thinks so she arranges to have them meet at the entrance gate and mingle freely in the ring which is surrounded by a tiny mouse village and other buildings scaled to children's size.

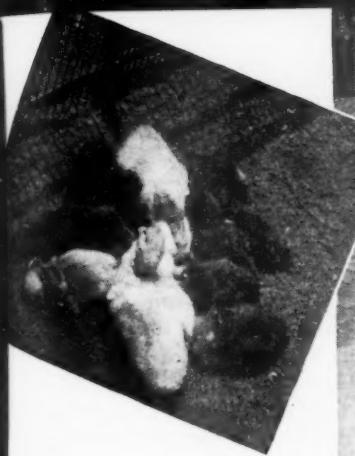




Experience on the pediatric wards is helpful in anticipating reactions of animals and children. Corinne prefers to have parents remain in the background where their fear of the un-

familiar will not affect the child's instinctive desire to touch and cuddle. "Children welcome new experiences," she says. "They should be encouraged not intimidated."





ences are low so that bipeds and quadrupeds may get close to each other. Baby sheep are new but ducks, geese, and rabbits come back to the Children's Zoo year after year. Animals look forward to being petted and children recognize old friends from earlier visits.

"The child's
need to cuddle,
to have experiences,"
she encouraged



Children ask questions about the animals and parents ask questions about their children. Miss Johannson finds her knowledge of child psychology and the rules of health an invaluable asset.



At the Children's Zoo

(Continued)





Children wish they could stay here forever. At least Miss Johannson sees to it that they return year after year in ever increasing numbers.

The Children's Zoo

Photos by Anne M. Goodrich, R.N.

Part of the "Zooperintendent's" responsibility is for the health and welfare of her charges. "Baby animals and baby humans have a lot in common," says Corinne Johannson. "They need to be well fed and well cared for. They need sunshine, exercise, and affectionate understanding." Miss Johannson is fond of both and they return her affection and look to her for guidance.



Calling All Nurses

NURSES WHO WANT to locate friends whose addresses have been recently changed or become lost during the past few years may submit for publication, without charge, a short notice of about 75 words "calling" for information about any other registered nurse.

VIRGINIA LANDEEN: Graduate of Eitel Hospital, Minneapolis, in 1940. Now married and living in the East. Please communicate with Mrs. R. D. Donaldson, Box 548, Packanack Lake, N.J.

L.T. SOPHIA DUDA: Graduate of Shadyside Hospital, Pittsburgh, Pa. Please write to Lt. Dorothy Stauff, N-761068, 62 Field Hospital, APO-168, c/o Postmaster, New York City, and Lydia B. Rickerds, 4104 Nichols Ave. S.W., Washington 20, D.C.

THERESA HUESTIS: Graduated from General Hospital at Wichita Falls, Texas, in 1944. I would like to hear from you. Doris Barnard, c/o Cook Hospital, Ft. Worth, Texas.

MALE ANESTHETISTS: I am a male nurse anesthetist who would like to contact other men in this field. Please communicate with D. S. Kozikoski, 3404-A N. 21st St., Milwaukee 6, Wis.

MRS. EVA CARROLL JENSEN: Graduate of New York Postgraduate Hospital. Last address Orlando, Fla. Please communicate with Mrs. Velma Lyons, Brook, Indiana.

KATHERINE LUBY: In Replacement Unit No. 9, World War I; also

GRACE CUNNINGHAM: At one time in Canal Zone. Please communicate with Miss A. Puck, U.S. Indian Hospital, Tacoma 5, Washington.

L.T. KATHLEEN NORRIS, A.N.C.: Served in the Southwest Pacific area from 1943 to 1945. Last heard from in Brisbane, Australia. How about a letter? Dorothy H. Shaffer, 132 Franklin Ave., Brookville, Pa.

PARTNER FOR CONVALESCENT HOME: I would like to start a small nursing home in partnership with another R.N. Location no object. If interested, write Box EEJ, c/o R.N.

NURSES OF WORLD WAR I AND II: We invite you to join with us in the Massachusetts All Nurse Post No. 296 of the American Legion. Help us make this one of the outstanding posts of its kind in the Country. Meetings are held every second Thursday of the month at the Hotel Statler, Boston, Mass. Please communicate with Edith M. Van Campen, Membership Chairman, Post No. 296, Hotel Statler, Boston, Mass.



Nursing the Polio Patient at Home

by Louise Suchomel, R. N.

AT THIS TIME of the year, when traditional outbreaks of infantile paralysis may be expected, every nurse, and especially every public health nurse, faces the possibility of giving nursing care to victims of this disease. It is only natural that she should seek advice with regard to the best modern practices of the nursing profession in this field.

Instruction in the special handling of these patients is usually available in hospitals. Hospitalization of patients, especially in the early, acute stage of poliomyelitis, is decidedly desirable. But what about the nurse who must go into the home to give care, sometimes within a day or two of the onset of this disease? What are the things she should know to contribute to the patient's recovery with the least possible crippling after-effects of this complicated disease? It will be an aid to the physician in charge of the case if the nurse whose

The author of this article is assistant consultant in orthopedic nursing of the National Organization for Public Health Nursing which, with the National League for Nursing Education, administers a grant of the National Foundation for Infantile Paralysis for a consultation service for nurses at 1790 Broadway, New York 19, N.Y. Miss Suchomel has been supervisor in orthopedic nursing for the Visiting Nurse Association of Detroit, is a graduate in physical therapy of the Harvard Medical School, and has specialized in care of infantile paralysis patients.

experience with poliomyelitis has been scanty knows the fundamentals of special nursing care for infantile paralysis cases.

Most public health nurses are on the alert for early recognition of symptoms indicating poliomyelitis during the months of June through September, when the largest numbers of cases are reported. They realize that early and proper care of this disease can save much pain and minimize the deformities which sometimes result. They also should know that patients placed under a physician's care who are in need of financial assistance may receive it from County Chapters of the National Foundation for Infantile Paralysis. No patient today need go without hospital, medical, nursing, or physical therapy care, for lack of funds. Often



a nurse can give this information to families.

Home contacts of public health nurses provide opportunities to interpret those measures which the local Health Department advises for

control of an epidemic. They also provide the means for helping to allay the fear and panic of the family, by the dispensing of information about infantile paralysis and its treatment. For example, it is reassuring for parents to know that 50 per cent of all infantile paralysis patients emerge with little or no crippling. And, if the patient must remain home during the acute stage of the disease, the family may be less apprehensive if instruction in proper nursing techniques also is available to them through the public health nurse.

The actual nursing care of poliomyelitis patients is similar to that for any febrile disease. But there are a few special procedures which warrant the attention of both nurse and family during the acute stage. For example, the patient should be moved as little as possible. Bathing is desirable, of course, but all unnecessary rubbing or massaging in any



form should be avoided. It is important that the patient maintain adequate diet and fluid intake. Records of eliminations should be accurately maintained. And, a special point: the depth and rate of respirations should be closely observed, even though there are no apparent symptoms of respiratory involvement, such as changes in nasal tone or difficulty in swallowing.

The bed position of infantile paralysis patients in the early stages is of extreme importance. It is the public health nurse's responsibility not only to understand *how* to maintain normal bed position, with home-made devices, if necessary, but to explain it and its significance to the family. Acute pain may cause a patient to assume poor bed posture until his symptoms are relieved. Yet he should be supported at all times with his body in as nearly normal alignment as possible.

The beds we find in homes are not as firm nor as high as those in hospitals. Therefore, a bed often must be elevated with foot blocks, to prevent back strain on the part of the nurse, physical therapist, or mother serving the patient. A firm surface, which is most comfortable for the patient, can be provided by placing boards under the mattress extending the entire length and width of the bed. A footboard, 18 to 24 inches above the level of the bed springs, held away from the mattress with two 4 by 4 inch blocks, will hold the patient's feet in normal position at right angles to the lower leg, if pain and spasm permit. It will provide space for the heel and keep bed covers off a painful leg. A covered box or home-made foot rest often is used instead.

Other aids to good bed position may be found in most homes. For instance, a small folded bath towel may be placed under the knees to support the joint in slight flexion. The legs should be placed slightly apart and the hips in a position midway between inward and outward

rotation. Sand bags, or a rolled, firm blanket placed along the leg from above the hips to just below the knees, will support the legs in this desired position. Remember, too, that when a patient is lying on his back, his arms should be straight at his sides.

No one position should be maintained for too long a time, as this increases the chances of shortening muscles. The average patient may be turned every two hours. Avoid twisting the trunk, though, for it may aggravate inflammation of the spinal cord. Limiting the back-lying position adds to comfort, aids circulation, and facilitates drainage of lymph and venous blood. Support should be given all joints when the patient is moved, however, as the skin and muscles are extremely sensitive and weak or paralyzed muscles must be prevented from stretching.

The nurse should be familiar with symptoms of spasm, so she can keep track of the progression of involvement. Symptoms readily observed are pain or tenderness, limitation of joint



motion, persistent disalignment of the body, or an extremity.

Physicians may prescribe heat in the form of hot packs to relieve this pain and muscle spasm. The parts of the body to be packed and the frequency of application will vary with the individual patient. Mothers and

other members of the family may help with hot-packing, if properly instructed. Passive movements, often recommended within a few days of the onset of acute symptoms, may be given by the nurse or some member of the family following instructions by the physical therapist. Physical therapy, such as tendon stimulation or muscle re-education, can be given only by a qualified physical therapist.

What will you need in the way of equipment for this early care in the home? Woolen and waterproof material for hot packs, of course. Most public health nursing agencies have a supply of this material at hand for such emergencies, and the National Foundation for Infantile Paralysis provides woolen material where needed. Old woolen blankets and bathrobes, as well as shower curtains and thin rubber sheets, can be collected from friends and neighbors, if necessary.

Equipment for preparing the packs, such as galvanized pails for boiling, or washing machines, electric roasters, waterless cookers, and large double boilers, usually can be obtained. They should be used only for preparing the packs for the patient, especially during the isolation period.

In some communities, local Chapters of the National Foundation have purchased commercial packing machines that can be used in the home.

If a district nurse has had preparation and experience in applying packs, she can teach a member of the family [Continued on page 66]

nily may
properly in-
ments, often
v days of
s, may be
e member
struction.

Physical
imulation
be given
ical ther-

the way of
are in the
proof ma-
rse. Most
cies have
hand for
National
Paralysis
al where
kets and
r curtains
n be col-
ghbors, if

ring the
pails for
nes, elec-
akers, and
ly can be
used only
r the pa-
isolation

cal Chap-
tion have
king ma-
the home
had prep-
applying
ember of
page 66.



The Yellow Flag Flies Again

by Ruth B. Scott, R. N.

AN OUTBREAK OF smallpox beginning in Seattle and San Francisco early this spring presented a challenge to public health authorities and local nurses. Many of us had never seen an active case of the disease, as the last recorded epidemic had occurred before most of the local nurses had entered training. However, medical personnel rose to the occasion and the nurses, old and young, assisted in the huge free clinics and busy private offices and hospitals. They gave information, assisted with immunization, and cared for the smallpox victims.

Seattle's first civilian case of smallpox was that of a soldier's wife who had been confined to the isolation ward of an Army station hospital with diphtheria. During her hospitalization, a smallpox patient, recently evacuated from military service in Japan, was being cared for in another section of isolation. After her discharge, the soldier's wife was admitted to a civilian hospital because of fever, headache, and backache. Her illness was later diagnosed as smallpox.

When hemorrhagic smallpox, the incurable so-called black smallpox, developed, it was obvious that a virulent oriental form of the disease was present. Before the epidemic

was halted, 67 new cases had been reported, 20 deaths had occurred, and the mass immunization program had been carried out, in which over 200,000 people were vaccinated in one week alone.

While five years is commonly accepted as a safe vaccination period, immunity is always a relative factor. During the epidemic, public health authorities advised three years as a revaccination period, all contacts to be vaccinated regardless of how short a period had elapsed. Nurses caring for actual cases were required to have a fresh "take" at least 21 days old, or to have had two definite immune reactions. The wisdom of revaccination after one immune reaction was demonstrated when a number of nurses, who did not get a "take" on their first revaccination, got a strong positive reaction on the second.

While smallpox vaccinations are considered routine for admissions to schools, for obtaining passports, etc., it is not until an epidemic occurs that the public becomes aware of the potentialities of the disease. In Seattle, newspaper reports moved from the inside pages to the front page. Public health officials, through the medium of radio and newspapers, urged immediate vaccination of the

entire population. The emergency hospitals in San Francisco were open 24 hours a day, and the Seattle Department of Health extended its revaccination from one clinic to four in the emergency hospital alone, and added clinics in 26 fire stations, in schools, and in housing projects. Many business firms and industries gave vaccinations to all employees. City and county public health nurses were busy with supervision and vaccination, while State public health nurses urged vaccinations on a State-wide basis. All ages from the newborn to the aged, the well and the sick, were vaccinated, except where specifically contraindicated and certified by a physician.

The Red Cross Nursing Service called nurses for volunteer work, and radio and newspapers issued an

appeal for registered nurses who had been vaccinated to assist with the clinics. At the fire station free clinic where I was helping, we worked a ten-hour day and vaccinated 2,700 persons in the first day alone. The red fire trucks were parked outside and a long line of adults, babies, and children formed before the opening hour.

We had a team of seven to ten persons for the actual vaccinations. Each team consisted of a doctor who volunteered through his medical society, two R.N.'s who volunteered through the Red Cross, two or three Red Cross nurses' aides, and, in addition, two or three medical corpsmen assigned by the Navy. The district visiting nurse supervised the supplies, personnel, and technique at our station. Relief hours were sched-

Probie



"He just likes to have us stand up."

who had
with the
arrived faithfully.

The routine consisted of having the vaccination site, usually the arm, wiped with acetone by one person while two others broke capillary vaccine tubes, put on the rubber bulb, and opened the tubes of sterile needles and placed them conveniently on sterile gauze. Two people applied the drop of vaccine from the tubes and three others, using a sterile vaccination needle and the multiple pressure or light prick method of approximately twenty-five insertions into the top cutaneous layer of skin, tried not to draw blood which would wash away the serum.

We tried to personalize a mass vaccination process, so far as we were able, within the limits of time and practicability. For instance, when a woman had a definite opinion of where she wanted her vaccination or her child's, it seemed to be good public health teaching to follow her wishes, if possible, instead of sending her away hurt and angry with a vaccination where she didn't want it. However, most doctors preferred vaccinating on the arm because of lessened danger of infection or irritation by muscle action in case of a "take."

Public morale at our station was excellent with a minimum of crying children. Many adults had foreheads dewed with perspiration or tense muscles which showed their nervous concern, but all were relieved at how quick and painless the actual vaccination was in spite of an hour's trying wait in line. "That's all, let it

dry five minutes," would surprise them, and if we did not watch, a few would go on to the next needle.

At some of the clinics, slips were given out with general information about care of vaccinations and what



to look for in the way of reaction. These slips saved the nurses valuable time and effort and were reassuring to the public.

Professional and lay organizations contributed not only to the actual immunization program but to the morale of the workers. The Red Cross canteen service brought sandwich lunches, hot coffee, and cartons of fresh milk for the workers. The Red Cross motor corps made frequent small deliveries of fresh vaccine so that it was never off the ice for a too-long period of time before use.

Firemen and P.T.A. volunteers kept the names, addresses, and age records of everyone being vaccinated and helped to form lines and have arms bare so that the teams could go to work with a minimum of preparation. The combined fire station clinics vaccinated a total of 60,000 people the first day. [Continued on page 64]



GLASS PLASTIC— Aid to Orthopedic Surgeons

A NEW PLASTIC CAST has been invented and perfected by an orthopedic specialist, Dr. Roger Anderson of Seattle, and any nurse who watches while it is applied is impressed by the simplicity and efficiency of the procedure.

An elderly patient, who might be upset by a trip to the cast room, is having a plastic cast applied to his slowly healing fractured leg while he remains comfortably in his own bed. None of the usually bulky protection of newspapers and draped sheets clutter the room. The doctor is wearing his street clothes, and the nurse has taken the precaution of tying a cotton gown over her white silk uniform which she thinks may be partly celanese and, therefore, sensitive to plastic solvents. Neither doctor nor nurse wears gloves.

The first step in applying a plastic cast is to roll stockinette onto the patient's leg with enough extending over the toe to furnish a hold for suspending the leg, and enough at the top of the thigh to turn down over the finished cast. A felt strip an eighth of an inch thick is wrapped around the top and bottom of the cast area to provide soft edges and is held in place with adhesive tape.

Alternately, the nurse and doctor dip rolls of wide-weave glass plastic

bandage into a special setting solution contained in a small aluminum drum. They lay the roll of bandage on a perforated shelf in the container, push down briefly on the plunger handle to immerse the roll for five seconds, then let the plunger rise so that the excess solution will drip for a moment.

The bandage is circular knit in the fashion of a man's tie. The wet roll is lifted out of the container and applied like any roller bandage, with each spiral overlapping a little past the mid-point of the previous turn. The knitted circular bandage gives freely so that the heel turn is made smoothly and easily. The doctor works from the toe upward, the nurse works from the knee downward.

When the whole cast has been applied, the doctor wraps it snugly in an elastic cotton molding bandage. Doctor and nurse then press and pat lightly on the cast to mold the layers together. Now the cotton molding bandage is removed and two electric hand dryers are clamped to floor stands to blow a current of warm air on the cast.

In an unbelievably short time the cast is finished. In ten minutes it will be hard and dry enough to hold its shape and the dryers can be turned

off. In a
pletely
faster
plastic
to admit
weight
The
nurse wh



Wear
ers may
clean
the ro
plaster
No sin
crumbl
predis
and ne
caked.
In a
set a

off. In a few hours it will be completely dry. In addition to drying faster than ordinary plaster, the plastic cast is also washable, porous to admit air, and only one-sixth the weight of a plaster cast!

The doctor leaves the room, the nurse wheels out the supply cart, and



Wearing this lightweight cast, industrial workers may keep on the job. Soap, water and brush clean soil away easily.

the room is completely neat. No plaster tracks up the floor and hall. No sinks will be stopped up, no crumbling plaster in the bed will predispose the patient to bed sores, and no plaster pail is permanently caked.

In a few minutes the nurse will set a walking button on the rein-

forced part of the cast directly under the weight-bearing line of the body. She will spray the heel area with setting fluid, hold the button in place with a square of four strips of bandage, apply the molding bandage briefly, and then let the cast dry. The next morning, the man will be permitted to walk. The resulting cast is more rigid and stronger than a plaster cast, but so light that the patient can move his leg with his own muscles. The porous cast allows more air to reach the skin beneath it. The new glass plastic also permits easy Xraying so that a clear, diagnostic film may be taken through the cast. The same Xray technique is used as if no cast were in place, and there is no shadow of the cast on the film.

When "Othello" was on tour one of the actors fractured his foot but he went on stage in his usual costume. Few in the audience noticed the black plastic cast. Only the story in the newspapers next day advised the audience of the cause of his slight limp. In addition to its other advantages, a plastic cast may be made in several colors.

In the surgery cast room, a woman with a six month's old multiple fracture of the thigh is having a new spica cast [Continued on page 74]

Public Health

[Continued from page 39]

The California State Nurses Association gains are higher than the improvement effected by the San Francisco public health group through its C.I.O. affiliation.

The C.I.O. City and County Employees Union launched its campaign with a 38-page brief address to the San Francisco Civil Service Commission. A provision in the City Charter requires that city employees shall receive like pay for like work. A large part of the brief presented a comparison of city and county salaries showing that nurses were underpaid by this standard. Said the brief also, "the duties of public health nurses of other California agencies are not as complex and varied as in San Francisco;" and that "a study of the public health nursing positions in the State of California under public or private control will nowhere show a list of functions and responsibilities as varied as in San Francisco."

Local nurses were not satisfied with the results, although they had no criticism of the efforts made in their

behalf by their C.I.O. representatives. Doris L. Robinson, director of the Bureau of Public Health Nursing in San Francisco, said the city offered stiff opposition. She said she thought that the C.I.O. had done an able job and conducted a sound campaign, getting the best results possible, considering current circumstances in the city.

Meanwhile, as a result of C.I.O. efforts in Alameda County, public health nurses have been granted a raise which amounts to 18½ cents an hour, effective this month, which they consider good.

First and foremost conclusion to be drawn is the fact that two separate and distinct groups have acted in behalf of public health nurses and have succeeded in improving their salaries. The methods used were similar—research, presentation of the facts, and persuasion. The results seem to disprove the argument that a State nurses' association is ineffectual as a collective bargaining agency; they also give the lie to the belief that a labor union must use radical methods or the strike technique in order to achieve its objectives.

Dr. Scholl's
FOR FOOT RELIEF

Being a Nurse, no one knows better than you do how you hurt all over when your feet hurt. Whatever common foot trouble you may have—corns, callouses, bunions, weak or fallen arches, tired, aching feet, perspiring, odorous or itching feet—there is a Dr. Scholl Remedy, Appliance, Arch Support, Pad or Plaster for quickly relieving it. The cost of Dr. Scholl's is very small. At Drug, Shoe, Dept. Stores and Toilet Goods Counters. FREE booklet on Foot Care. Write THE SCHOLL MFG. CO., Inc., Dept. RN, Chicago 10, Ill.

atives
of the
sing in
offered
though
ole job
ampaign
e, con-
in the

C.I.O.
public
anted a
ents an
which

tion to
o separ-
acted
es and
g their
were
of the
results
nt that
neffec-
t agen-
the be-
re radi-
chnique
ves.

"RAZZBERRIES!
sez I to
summer prickles
and chafes!"



◆ **Most doctors
in survey say
MENNEN is the
best baby powder—**

"Here's the recipe. Tell Mommies to sprinkle mild, soothin' Mennen Antiseptic Baby Powder on baby's skin every day, for smoother, lovelier skin, 'glowin' with health! Helps prevent and relieve hot weather prickles, urine irritation, many other troubles. Extra-smooth 'cause it's cloud-spun—better against chafing. New scent makes baby smell so sweet. For baby's sake (and Mommy's too), pleee recommend *Mennen*!"

Something **NEW** under the sun! **TAN** beautifully,
safely, comfortably . . .

New beauty secret—nurses and mothers rave about their beautiful suntans (and baby's, too) with soothing, protective Mennen Antiseptic Baby Oil. Try it yourself now—best for baby, best for you!

MENNEN ANTISEPTIC **BABY OIL**





"My Feet Feel As If They Couldn't Take Another Step!"

... that's the way night duty in crowded wards leaves all of us. But I take a MU-COL foot bath as soon as I'm off. It drains the ache away . . ."

Mu-col

**Eases Tired
Aching Feet**
(due to overstrain)

That was a nurse's discovery! A little MU-COL powder dissolved in warm water for a foot bath gives wonderful quick relief. That's only one of many uses for MU-COL, which is recommended by doctors for its soothing, cooling action on mucous surfaces.

MU-COL is a balanced saline-alkaline bacteriostatic and mucus solvent. In powder form it does not deteriorate and is quickly soluble, handy for traveling. Among its many valuable uses are: as a hygienic detergent of mucous surfaces, effective nasal douche, gargle or mouth wash, a cleanser for dentures, to relieve discomfort from sunburn, heat rashes, non-poisonous insect bites or other minor skin irritations. MU-COL is non-poisonous and non-corrosive—safe for the medicine cabinet.

1 Name _____
1 Address _____
1 City-State _____

Before the war thousands
of nurses were intro-
duced to MU-COL
by R.N. Why not
you, now? Please
clip the cou-
pon.

TO—
THE MU-COL CO.
Dept. RN-76
Buffalo-3, N.Y.



MICROBIOLOGY FOR NURSES

By Charles G. Sinclair, M.D.

F. A. Davis Company, Philadelphia, Pa.,
1945. Sixth revised edition, \$2.75.

- The book is divided into two parts. The first part describes microorganisms, various diseases and their causes, as well as the action of drugs and the effect of sterilization upon the various organisms. The second part is devoted to an outline of laboratory tests which provide practical experience and illustration of the foregoing text. A useful book for study and reference.

THE FUTURE OF PREVENTIVE MEDICINE

By Edward J. Stieglitz, M.D.

The Commonwealth Fund, New York.
First Edition, \$1.00.

- The optimum development of the individual as an integral part of the community and the responsibility of the physician and the general public in carrying out this objective is the thesis of this book. Illustrated with graphs and tables.

HEALTH CARE OF THE FAMILY

By Ramona L. Todd, M.D. and Ruth B.
Freeman, R.N.

W. B. Saunders Company, Philadelphia,
Pa., 1946. First Edition, \$3.00.

- A valuable text for both the homemaker and the nurse. This book outlines causes of disease and its prevention. It stresses child care in health

WONDERFUL! FRESH
STOPS MY PER-
SPIRATION WORRIES
COMPLETELY!

AND FRESH IS SO
PLEASANT TO USE.
IT DOESN'T DRY
OUT IN THE JAR!



New antiseptic cream deodorant stops perspiration worries completely... doesn't dry out in the jar!

FRESH contains the most effective perspiration-stopping ingredient known to science.

FRESH is a smooth cream that doesn't dry out in the jar. It is never greasy. Never gritty. Never sticky. Usable right down to the bottom of the jar.

FRESH is gentle... accepted for advertising in the publications of the American Medical Association.

50¢ • 25¢ • 10¢



CONTI CASTILE SOAP, U.S.P.

For infants, children, and skin conditions wherever water itself can be used.

P.S. NURSE: A soap so highly recommended for children's skin, is perfect for yours, too!



CONTI PRODUCTS CORP.
45 Clinton Avenue, Brooklyn 5, N. Y.

and illness. The chapters on reproduction should prove especially useful to the nurse wishing to teach sex hygiene to adults or adolescents. Illustrated with simple line drawings and graphs, this is an easily understood text which will be valuable to students and teachers of public health.

A MANUAL OF ALLERGY LECTURES FOR NURSES

By James A. Mansmann, M.D.

University of Pittsburgh Book Store, Pittsburgh, Pa., 1945. Second Printing, \$75.

• A definition of allergy is followed by clear descriptions of clinical manifestations, their causes, and treatment. This is not a textbook, but rather a notebook for quick reference which will supply the key information with which to look up further facts.

PREVENTIVE MEDICINE AND PUBLIC HEALTH

By Wilson G. Smillie, M.D.

The MacMillan Company, New York, 1946. First Edition \$3.00.

• An introduction to a point of view on public health and its relationship to the human race is the object of this volume. Housing, sanitation, and food are discussed in their relationship to the individual and to the community as a whole. Various diseases and their causative factors, together with their treatment and cure, are clearly outlined. The chapter on vital statistics is clearly set forth and should prove invaluable to the nurse who wishes to know what statistics mean, how they are arrived at, and

"I know
affect
I can
work
relie

For
sion
poul
after
dent
locat
table
all".
is de
effec
visi

De
me
of



"My Toothache First Aid Kit is in This Little Box"

"I know how seriously toothache can affect a patient's comfort—that's why I carry Poloris in my first aid kit. It works so quickly and safely to bring relief."

For over 30 years the dental profession has prescribed POLORIS dental poultice for toothache, discomfort after extraction and other emergency dental pain. POLORIS treatment is local—not systemic. Unlike analgesic tablets and powders it is not a "cure-all"—has no bad after-effect. POLORIS is designed solely to give prompt, safe, effective relief until a dentist can be visited.

POLORIS is easily applied between cheek and gums. Its counter-irritant action quickly relieves the congestion that causes discomfort, accelerates the reparative processes in the pain area, increases local nutrition and produces better after-pain results.

For FREE Supply of POLORIS...

Free samples of Poloris dental poultices sent on request.
Address: Poloris Company, Inc., Dept. 56-C, 12 High Street, Jersey City 6, N.J.



POLORIS

Dental Poultice is Recommended by Many Thousands of Dentists and Physicians



M. BURNEICE LARSON, *Director*

There comes a day in each life (no matter how well-ordered) when it becomes evident that there will have to be some changes made! Sometimes it is merely a question of going on a diet, or over-hauling the wardrobe, or giving a mercurial boyfriend his final out. But sometimes it involves extricating oneself from a professional situation fraught with tension.

RN's must admittedly work under a nervous strain a great deal of the time. It takes a lot of will-power to superimpose the cheerful countenance for patients on the grim lines of weariness which nature has sketched in for you. It takes still more will-power to produce the soft answer unfailingly if some one from whom you happen to take orders is definitely on the brusque side.

If you have decided that the requisite will-power is about to fail you on both counts and that you are due for your first vacation in many months to be followed by a complete change of environment—we hope you'll let us know. The opportunities available to RN's considering re-locating are numerous. They are also desirable.

Our service, as you know, is completely confidential and nationwide in its scope.

M. BURNEICE LARSON

Director, THE MEDICAL BUREAU

Palmolive Building

Chicago 11

how to evaluate them. Interpreting the health standards of your community, its needs, and possibilities for improvement should be easier after reading this worthwhile text. Of paramount interest to the public health nurse, this book should also prove a valuable reference for the student.

SYPHILIS

Pamphlet.

The Community Service Society of New York, 1946. Five cents a copy up to 100, 4c each over 100 copies, plus postage.

- One of a series of pamphlets designed to be of use to the public health nurse in teaching the family prophylaxis and prevention of the disease. Recognition of symptoms and outline of treatment are clearly described.

News of the Month

[Continued from page 38]

will take into consideration improving the facilities for prevention and care of communicable disease, and improvement of direct medical service in the field of the physically handicapped, as well as streamlining inspection and supervision of foodhandlers and premises on which food is sold.

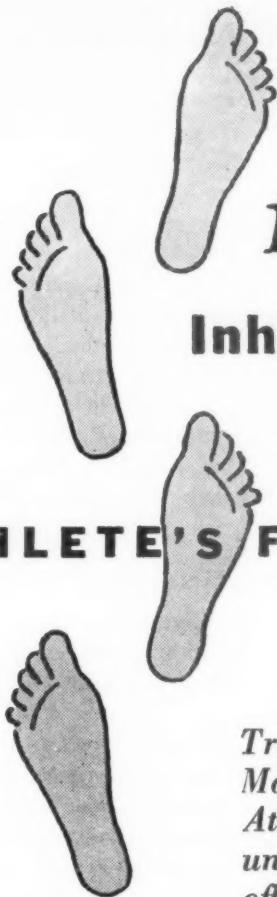
In an effort to improve the basic health of the city, Superintendent of Schools John E. Wade has announced that evidence of a health examination by a registered physician will be required of every pupil applying for admission to New York City public high schools next September. The

erpreting
ur com-
ilities for
ier after
text. O
e public
uld also
for the

y of New
py up to
ies, plus

lets de-
e public
e family
of the
oms and
early de-

improv-
ion and
se, and
cal serv-
y handi-
inspec-
handlers
sold.
the basic
ident of
nounced
ination
ll be re-
ring for
y public
er. The



MAZON

Inhibits Growth

of

ATHLETE'S FOOT Fungus

*Treatment with Mazon and
Mazon Soap helps to bring
Athlete's Foot infections
under control quickly, and
effectively prevent their
spread.*

• • •

Indications include Eczema, Psoriasis, Alopecia, Ringworm, Dandruff, Athlete's Foot and other skin irritations not caused by or associated with systemic or metabolic disease. Mazon is anti-pruritic, anti-septic, anti-parasitic. **It is easy to apply and requires no bandaging.**

Belmont Laboratories Co., Philadelphia, Pa.

regulation grows out of the findings of the study conducted in six of the high schools last year, and is based on the need "to determine the pupil's health and physical fitness for the course of training for which he has applied at the start of his vocational or high school training, rather than later in his career."

Taking into consideration the needs of the physically handicapped, the Metropolitan Museum is planning reconstruction of its buildings in such a way that persons confined to wheelchairs or crutches may have easy access to all parts of the building. The new buildings will be constructed to be reached from a grade entrance, and a system of ramps and elevators will make all of the galleries accessible. The Metropolitan will be the first large museum to cater to the needs of art lovers in wheelchairs.

Another type of chair was in the forefront of the city's news during the month when a memorial chair was dedicated in the name of Florence Nightingale by the board of trustees of the Town Hall Association. The chair, a tribute to all nurses, is one of about five-hundred named in

honor of various persons. The chair was unveiled by Annie W. Goodrich, dean emeritus of the Yale School of Nursing, and Gertrude Lawrence who read Longfellow's poem "Santa Filomena," in which Miss Nightingale is called the "Lady of the Lamp."

Army

The War Department is conducting a survey to determine the most prevalent clothing sizes of personnel leaving the armed services. The information will serve as an aide in formulating future uniform design. More than 60 separate measurements will be taken of each of the 10,000 women who pass through the survey line at Fort Dix, New Jersey, and Fort Sheridan, Illinois. The discharges include both Wacs and Army nurses who are being examined by a staff of female anthropologists.

The information program of the A.N.C. as it functioned during the war under Major Edith A. Aynes has been discontinued as part of peace-time budget cuts. Charged with Procurement Publicity, Public Rela-

It is up to the Nurse . . .

to co-ordinate procedures so that the oxygen tent canopy is opened as infrequently as possible. Thus reducing waste and maintaining the prescribed concentration.

Send for the Linde Oxygen Therapy Handbook. There is no charge.

THE LINDE AIR PRODUCTS COMPANY
Unit of Union Carbide and Carbon Corporation
30 East 42nd St. UCC New York 17, N. Y.



"LINDE" OXYGEN U.S.P.

chair
drich,
ool of
rence
Santa
ghtin-
amp."

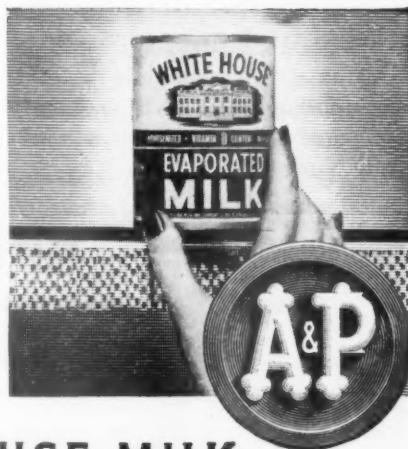
duct-
most
onnel
ne in-
de in
esign.
ments
0,000
urvey
, and
dis-
Army
by a

f the
g the
es has
eace-
with
Rela-

No telling how far he'll go — but he's taking his first step in the right direction! And to get baby off to a sunny start, many doctors approve White House Milk for infant feeding. Each pint is fortified with 400 U.S.P. units of "sunshine" vitamin D₃ and naturally provides each essential nutrient of fresh milk. Yes, White House is ideal for every milk need. There's none better!



Headed for the White House!



NOT CONNECTED WITH ANY COMPANY USING A SIMILAR
NAME OR BRAND — MADE, SOLD AND GUARANTEED BY A&P

WHITE HOUSE MILK

There's None Better

400 U.S.P. UNITS OF VITAMIN D₃ PER PINT



tions, and preparation of publications bearing on Army Nurse Corps Morale, the information service is being absorbed into A.N.C. headquarters program.

Major Aynes has been reassigned to the University of California. Before proceeding to the West Coast, she was awarded the Army's Commendation Ribbon. Said Surgeon General Norman T. Kirk, "You have helped the Medical Department accomplish its mission."

New A.N.C. personnel setup includes Lt. Col. Katharine Baltz, who has been appointed consultant on nursing education. A native of Chicago, Col. Baltz graduated from Pasavant Memorial Hospital in Chicago and received her B.S. degree in nursing at the University of Minnesota. During the war she served overseas as chief nurse of the 12th General Hospital in Africa and Italy. She will be Consultant for the Army Nurse Corps in all matters pertaining to military training and educational programs for Army nurses. In addition to her other accomplishments, Katharine Baltz is the youngest lieutenant colonel in the Army Nurse Corps.

The Yellow Flag [Continued from page 51]

Health authorities in the Seattle city area plan to ask for a State law requiring compulsory vaccination before children are admitted to school. Such laws are already on the statute books in many States, and authorities feel that they are important in preventing epidemics. Because the early symptoms of the disease sometimes resemble influenza, patients may expose others before their illness is correctly diagnosed as a case of smallpox.

Civilians entering the United States from abroad have reported in the past that they were merely asked whether they had been vaccinated but since the epidemic began, the U.S.P.H.S. is requiring a certificate showing vaccination within the past two years.

Ships in many harbors are again flying the yellow quarantine flag. Seattle's experience in controlling a smallpox epidemic presents an excellent example of community resourcefulness in handling a difficult and unfamiliar situation.



SPECIALIZATION CLINICAL LABORATORY TECHNIQUE

holds greater opportunities for the capable Nurse Technician than ever before. It is the one field that is not overcrowded, and one in which professional ability is highly regarded and recognized. Our catalog will be of interest and we shall be pleased to mail it postpaid upon request. *Established 28 years.*

Northwest Institute of Medical Technology, Inc.
3404 E. Lake Street Minneapolis 6, Minn.

TOMORROW'S FABRIC

... Today!

WHITE ROCK UNIFORMS

styled to lead . . . priced to fit the budget, now present two distinctively smart uniforms in a fabric destined to become one of the most popular among nurses ever created . . .

*Celanese
Swilanese*

HERE'S WHY you'll want these attractive, wear-resistant White Rock Uniforms without delay—

Ordinary soil will not penetrate the fibre, hence garments can be easily washed in lukewarm water with any mild soap.

A quick drying fabric . . . unnecessary to wring out . . . will not stretch or shrink . . . overnight hanging removes casual wrinkles.

The smooth finish, repellent to dust and dirt, necessitates fewer launderings . . . fast color or fabric itself not affected by perspiration or salt water.



STYLE 804 (long sleeves)
STYLE 805 (short sleeves)
Sizes—12, 14, 16, 18, 20.
Juniors—11, 13, 15, 17.

STYLE 810 (long sleeves)
STYLE 811 (short sleeves)
Sizes—12, 14, 16, 18, 20,
38, 40, 42.

ONLY \$5.98
made possible by
our direct factory-to-you
sales policy

WHITE ROCK UNIFORM CO. • LYNCHBURG, VIRGINIA

NURSE VETERANS OF WORLD WARS I AND II: If you are located in the vicinity of Dover, N.J., you are invited to join a Post for Women Veterans which is now forming. Whether you are still in service or have returned to civilian life, you are eligible to join. We shall meet with the William Hedges Baker Post No. 27 until we are definitely established. Meeting nights are second and fourth Thursday of each month at 8 P.M. at Legion Hq., 1 Legion Place, Dover, N.J. Please communicate with E. Doris Thorp Taylor, 11 Lincoln Ave., Dover, N.J.

The Polio Patient at Home

[Continued from page 48]

the procedure. If she has not had this special training, she should request the help of someone who has, whether within her own organization or another community agency.

As the disease progresses the point is reached when muscle re-education begins. The nurse and family should meet with the physical therapist at least once to learn the

various bed positions which provide adequate support for affected muscles, and how to handle the patient without discomfort or the danger of increasing spasm.

A daily routine, written out by the nurse, will prove to be a great help to the family. Home tasks usually need redistribution at this time to allow for rest, recreation, shopping, cooking, and other household activities of the mother who must care for her child. This is extremely important with regard to psychological problems arising from over-attention to the patient, as well as over-fatigue of the mother.

The convalescent stage of poliomyelitis, usually occurring from six to eight weeks after the onset of acute symptoms, is the period in which weakened muscles make their greatest gain in power. When muscle tenderness has disappeared, the medical and nursing supervisor play especially important roles—and continue to do so, sometimes, for a year or two, until physical restoration of the patient is complete.

If a patient has been hospitalized during the acute stage, which for-

"SPECTACULAR RELIEF!"

"I was troubled with an allergic conjunctivitis and ALKALOL gave spectacular and immediate relief."

No wonder this California Nurse likes ALKALOL!

THE ALKALOL CO.,

May we send
you an eye-
dropper bottle?

Taunton, Mass.

ovide
mus-
atient
ger of

oy the
t help
usually
me to
opping,
activities
are for
important
logical
vention
atigue

polio-
om six
set of
iod in
e their
n mus-
ed, the
or play
d con-
a year
tion of

italized
uch for-

end
y e-
telle?
ss.

FOR WOMEN AT PLAY
better management of menstrual hygiene

No more need the menses harness create "recluses from play", because TAMPAX (designed by a physician) obviates the principal reasons why wearers of external guards often refrain from athletic sports and social activities. • For, by providing safe, adequate *internal* protection, TAMPAX eliminates *objectionable odor; prevents perineal irritation and chafing; avoids revealing bulges; and promotes normal external daintiness*. • To meet the varying requirements of the individual, TAMPAX is available in "Super", "Regular", and "Junior" absorbencies. The coupon below is for your convenience.

ACCEPTED FOR ADVERTISING BY THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION

TAMPAX
FOR BETTER PROTECTIVE MANAGEMENT

TAMPAX INCORPORATED
PALMER, MASSACHUSETTS
RN-76

Please send me a professional supply of the three absorbencies of Tampax—together with literature, including a summary of 6500 cases.

Name _____
Address _____
City _____ State _____

PLEASE PRINT

tunately occurs more often today than a decade ago, continuity of care is doubly important upon his discharge and return home. The public health nursing agency should be advised of a patient's discharge a few days in advance, so that preparations in the home can be made more easily and effectively. A visit on his first day home assists the family in establishing a home routine.

The teaching aspect of the public health nurse's role is heightened during the convalescent period. After all, an acutely ill patient will cooperate well if he receives comfort by his cooperation. A convalescing patient, more or less free from pain, will cooperate only if he understands (and his family, too) *why* protective recommendations are important to him. The object of nursing care during this period is to afford the patient as nearly a normal life as is possible. But protection of weak and paralyzed muscles and continued adequate rest are essential as the patient's activity increases.

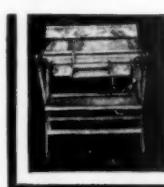
Close attention to posture during rest, as well as activity, must be given. Simple little devices to insure

this are available. A tilt-top table extending across the bed may prevent twisting of the trunk to one side when a patient is eating, reading, etc. If he is permitted to sit up, a washboard or card table can be used as a back rest. Support under the knees, and a foot rest, still may be needed. Explain to the family *why* a bed table high enough to allow the arms to rest comfortably, or a chair which allows good sitting posture with back and arm support, no pressure under the knees and feet flat on the floor, are important. They are more important at the beginning of the convalescent period than later, when appliances such as corsets, braces, and splints may be prescribed to hold trunk, arm, or leg in correct position. If and when the time comes for use of appliances, the nurse again must help interpret their value, proper use, and care.

If physical therapy is being given, a schedule for visits by the physical therapist and the nurse should be worked out. In some communities nursing care is given on one day and physical therapy on another. This plan avoids fatigue of the patient and

EVERY MOTHER NEEDS A Bathinette*

COMBINATION BATH AND TABLE



The "Bathinette" Way is the Accepted Way of bathing babies. Hammock with Headrest supports baby's head—leaving mother's hands free for bathing. Equipped with Shelf for baby's things and Spray for filling Tub and rinsing baby.



BABY BATHINETTE CORPORATION
Sole Builders Rochester 4, N. Y.

*Trade Mark Reg.
U. S. Pat. Off.

table
y pre-
the side
reading,
up, a
e used
er the
may be
y why
ow the
a chair
posture
o pres-
et flat
hey are
ing of
a later.
corsets.
e pre-
leg in
en the
res, the
et their

given.
physical
ould be
nunities
ay and
t. This
ent and

te*
TABLE

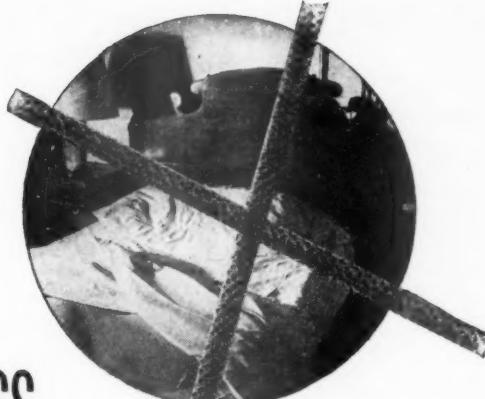
thing
ead—
with
b and

Reg.
Off.

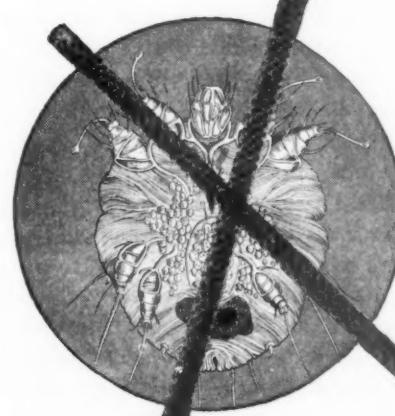
NO MESS...

NO GREASE...

NO SCABIES



You remember how just hearing that a certain patient had scabies or pediculosis would make you itch even if you never went near him. And you remember only too well the ointment-smeared bedding that seemed the only way to get rid of the pesky skin parasites.



Now all this is obsolete. With 'Wellcome' Benzyl Benzoate Emulsion, the patient is merely painted with a clean, *non-greasy* emulsion, and when he bathes twenty-four hours later, the parasites are dead. Recurrence and dermatitis are infrequent.

—'WELLCOME' BRAND

BENZYL BENZOATE

—EMULSION 50%—

*Diluted with an equal volume of water before application.
2 or 3 fluid ounces of the 25% emulsion is usually sufficient
for one treatment.*

BOTTLES OF 4 FL. OZ.

BOTTLES OF $\frac{1}{2}$ GALLON



BURROUGHS WELLCOME & CO. (U.S.A.) INC., 9 & 11 EAST 41st ST., NEW YORK 17

BENCOME UNIFORMS

Give You

PROFESSIONAL STYLE
COMFORT
SMARTNESS
And VALUE

As New As
Penicillin

2 PLY SANFORIZED
QUALITY POPLIN

\$6.89 each

No. 551 . . . Long Sleeves
No. 0551 . . . Short Sleeves
Sizes 12 to 42
Also 11, 13, 15

Convenient Novelty
Pockets on Skirt & Blouse
Gripper Flared Skirt
Opening
Set in Belt

BENCOME UNIFORMS, Inc.

222 West 34th Street, New York 1, N.Y. — Near Penn. Station

USCO Professional
WHITE
LEG
MAKEUP

\$2
POSTPAID

Includes a pair of "Socklets"

New liquid stocking eliminates the need for regular stockings and sticky undergarments. Easily and smoothly applied with hand, sponge or cotton, and removes quickly with soap and water. Send coupon for 10 oz. bottle and a pair of comfortable "socklets" to wear inside shoes.

U. S. MEDICAL SPECIALTY CO. Inc.
3837 Minnehaha Avenue, Minneapolis 6, Minn.

Enclosed is \$2.00 for Leg Makeup and size
"socklets."

Name
Address

may provide daily supervision of care given by members of the family. One visit of nurse and physical therapist, together, is a good idea. It gives the therapist an opportunity to explain to the nurse and the family which muscles are weak and which ones tight or short, to demonstrate bed positions and their importance in protecting weak muscles and preventing deformities.

It must never be forgotten that the benefit of physical therapy treatments can be lost if poor bed positions are assumed by the patient during rest and activity. An example of this, readily recognized by nurses who have visited infantile paralysis patients in the home, is the patient with tightness of back muscles and weak abdominals who is found lying on his abdomen, propped on his elbows, to read or color. The position stretches the already weak abdominals and holds the back muscles in a shortened position. The patient and his family must understand the danger and wastefulness of indulgence in this posture.

Regular habits of eating, sleeping, and resting, with special attention to fresh air either out-of-doors or with windows opened in the room part of each day, of course, are as important to the infantile paralysis patient as to any other.

In addition to physical needs, the patient may require guidance from the nurse to meet his emotional, educational, and vocational problems. Other community agencies should be called upon for help, as required. The care of the infantile paralysis

f care
y. One
rapist,
es the
explain
which
ones
the bed
ence in
l pre-

in that
treat-
posi-
patient
exam-
ed by
fantile
is the
mus-
who is
omen,
ead or
he al-
ds the
sition.
st un-
steful-
ure.
eeping,
tion to
er with
part of
ortant
t as to

ls, the
from
al, ed-
blems.
should
quired.
ralysis



no
deception
here

The false sense of security engendered upon resort to narcotic or anesthetic agents in the medical management of hemorrhoids is dangerous. For these drugs may mask more serious rectal pathology by dulling the normal sensory warning mechanisms.

With 'Anusol'* Hemorrhoidal Suppositories effective relief is obtained without deception. By means of decongestion, lubrication and protection, 'Anusol' Hemorrhoidal Suppositories bring comfort promptly, while enhancing early reversal of the varicose process . . . all without resort to narcotics or anesthetics, styptics or hemostatics.

Schering & Glatz, Inc., a subsidiary of

WILLIAM R. WARNER AND CO., INC., 113 WEST 18TH STREET, NEW YORK 11, N. Y.

'anusol'

*Trademark Reg.
U. S. Pat. Off.

Available in boxes of
6 and 12 suppositories

Hemorrhoidal Suppositories

**"Only Sterilized
Swabs are Safe!"**



STERILIZED

Q-TIPS
Double-tipped SWABS

25¢

45¢

Q-TIP SWABS, N.Y.

patient is a community project involving hospitals, public health nursing agencies, boards of education, and rehabilitation bureaus, as well as the National Foundation for Infantile Paralysis. And good nursing care from the beginning—for as long as it is needed—plays a big part in achieving health and well-being of patients.

[*Nurses seeking further information on the care of poliomyelitis are invited to write the National Foundation for literature and specific advice. The address is 120 Broadway, New York 5, N.Y.—THE EDITORS.*]

Keeping Patients Cool

[Continued from page 31]

patient's tray. But where latitude is permitted, the imagination she uses in carrying out the doctor's orders for forced fluids or other dietary measures may be the determining factor in how willingly the patient eats. An attractively arranged tray, bright with color, is always desirable. It is especially so in hot weather.

While it is not desirable to exclude hot foods entirely from mid-summer meals, it is important to include additional fluids and particularly those whose mineral content may replace some of the minerals lost by the body as it perspires. Chilled tomato and orange juice may be varied by the juices of other cooked, fresh, or dried fruits if the diet permits. There is something about the tinkle of ice in a pitcher of cool fruit juice that gives the illu-

sion of coolness unsurpassed by any other summer sound. Milk should not be neglected in the summer dietary and may be served in a number of attractive ways. As ice cream, as a between-meal drink by itself, or with the addition of a few drops of vanilla, a dash of nutmeg, or half-and-half with seltzer or soda water. For the high caloric diet the eggnog is unsurpassed and is particularly attractive in summer when served cold with the white of egg whipped on top and garnished with a sprinkle of nutmeg.

If your patient is wearing her own night clothes, you may find that folding the nightgown up away from the legs will make your women patients feel cooler, but be careful not to make a heavy hot band of the gown over the stomach. By the same token, men wearing only the top of their pajamas get a circulation of air through the sheets and are generally more comfortable. Make up your patient's bed with just a sheet and, if you wish, a light coverlet folded over the foot of the bed. Take off the blanket and keep it out of sight during the daytime. It looks hot even if it doesn't come in direct contact with the patient. Unless your patient wishes to read or engage in some activity where she is going to use her eyes, it will give an illusion of coolness to let down the venetian blinds or draw the shades part way.

Hair on the neck looks and feels hot. If your patient must lie on her back, try braiding her hair on each side of her head and laying it along

Greater Comfort

AROUND THE CALENDAR

HYPEROL has long helped to keep women more comfortable and aided in mitigating periods of functional distress. The well balanced formula of HYPEROL acts to improve the local blood supply, reduce congestion, and overcome distressing spasm which might ordinarily hamper normal activities. General well being is promoted where hematinic effects are required.

HYPEROL

IN UTERO-OVARIAN IRREGULARITIES

Contains Hydrastine
Alkaloid, Aloin,
Apiole, and Ferrous
Carbonate (Blaud).



The
**PURDUE FREDERICK
COMPANY**

Makers also of Gray's Compound

135 Christopher Street
New York 14, N.Y.

the pillow, away from her face. If she is able to sit up, pin the braids on top of her head or brush the hair up all the way around and tie on the top of the head with a gay ribbon.

Keeping your patient cool during hot weather is largely dependent upon the illusion of coolness created around him. You can't control the weather, to be sure. But you *can* add to the satisfactions of giving good nursing care by doing all in your power to help your patient forget the heat.

Glass Plastic

[Continued from page 53]

of plastic applied. "You should see us apply a cast directly over a compound fracture," the nurse says. "We autoclave the plastic bandage, the empty immersion can, the mineral oil, and sheet wadding. The setting fluid sterilizes itself."

The nursing care of infected fractures is simplified because hot com-

presses do not soften the plastic cast and may be applied through a window in the cast as often as desired.

The plastic material has the versatility of water which may change from liquid to ice to liquid again. If a pressure point on the cast needs release, the cast may first be softened by applying setting fluid, then lifted with a forceps, and reset in the desired shape. Cracks may be readily mended or wedging accomplished in the same manner.

The cast may be cut easily after using the setting fluid to soften it before the scissors or plaster cutters are used. The procedure is fast and clean as compared to the messy cutting of a plaster cast.

If an active child has to wear a cast for three months he still may play and climb trees, and when he splashes mud on his cast it may be soaked in a pail of water or scrubbed off with soap and a brush. If waterproof stockinette is used, polio patients and swimming enthusiasts may go in the pool. The feather-

LAVORIS
For those who have
Artificial Teeth

It cleans, it stimulates and relieves soreness

tic east
a win-
sired.
he ver-
change
gain. If
t needs
oftened
n lifted
the de-
readily
shed in

y after
often it
cutters
ast and
messy

wear a
ill may
hen he
may be
rubbed
water-
lio pa-
usists
eather-

Hobgoblins in the Night!



R

Dial (ciba) — 1.5 gr
1-3 tablets on retiring

Ludovitz M.D.

When sleeplessness and nightmares mar the patients' tomorrow, many physicians prescribe Dial.

This effective sedative and hypnotic will induce peaceful sleep. Dial may be taken during working hours in moderate dose when required.

DIAL

is available—Dial Tablets: $\frac{1}{2}$ grain, bottles of 24 and 100; $1\frac{1}{2}$ grains, bottles of 15 and 100. Dial with Urethane: 1 cc. ampuls, cartons of 5, 2 cc. ampuls, cartons of 5 and 20.

Dial—Trade Mark Reg. U. S. Pat. Off.
Denotes Ciba's Dailybarbituric Acid.



CIBA PHARMACEUTICAL PRODUCTS, INC., SUMMIT, NEW JERSEY

In Canada: Ciba Company Ltd., Montreal

weight cast does not retard swimming. Instead of using stockinette, some experienced doctors apply the plastic cast directly over the skin which has been powdered or rubbed with mineral oil.

The nurse no longer has to call for help for turning a patient in a body cast, for the lightness of the plastic cast makes the patient easy to handle. If necessary, the patient can be given a shower with the assurance that the cast will dry readily.

The initial cost of the plastic cast is slightly higher than plaster if it is to be used for only a short period of time, but since it is more durable it is cheaper than plaster for a long application, as it does not need replacement. Because of the ease of application, the water resistance,

and the lightness of the finished cast, physicians and nurses are watching with interest this new orthopedic development.

Malaria-Antagonist

[Continued from page 31]

(4 - diethylamino - 1 - methylbutylamino) quinoline. But German scientists were unable to perfect a method of synthesizing one of the intermediate chemicals needed to create SN-7618, so they had discarded it as impractical.

Then American ingenuity stepped in and found the answer. The original synthesis, that formed the basis of the drug, was developed by two young chemists, Dr. Alexander R. Surrey, 32, and Henry F. Hammer,

ENZO-CAL

Tubes of 2 ounces

Greaseless cream of
zinc oxide, calamine
and benzocaine

IS THE ONE
BRIGHT SPOT IN THE DAY (OR
NIGHT) TO THE PRURITUS PATIENT

- Stops itching promptly
- Protects and aids healing
- Clean and convenient to use

CROOKES
Laboratories

finished
es are
new or-

ylbutyl-
han sci-
rfect a
of the
ded to
ad dis-

stepped
the origi-
the basis
by two
ander R.
ammer.

of
amine
e

NE
OR
ENT

**SOLVES THE
PROBLEM OF**

Perspiration Odors

For the Patient



Used before office treatments or
in the sickroom, MUM makes
patients feel pleasantly fresh and
clean, more relaxed.

For the Nurse



Applied under the armpits,
MUM disappears immediately,
and gives all-day or all-evening
freedom from perspiration odors.

A dainty snow-white cream, MUM rapidly neutralizes
perspiration odors without interfering with normal sweat-
gland activity.

There is no irritation, no injury to delicate fabrics when
MUM is used.

Why not try a jar of MUM today?



Takes the odor out of stale perspiration

A Product of BRISTOL-MYERS CO., 19D West 50th St., New York 20, N. Y.

24. Scientists at the University of Illinois worked 24 hours a day, in three shifts, to speed production of a chemical needed for making the new antimalarial. Working together, these forces managed to develop a simple method of synthesis that made large scale commercial production of SN-7618 feasible.

The results of this work remained a military secret until the first of the year when SN-7618 was announced. By that time it had been tested on animals and found successful. Later it had progressed to a wide testing program on conscientious objectors and prisoners in penitentiaries who volunteered their service.

Unlike atabrine, SN-7618 does not yellow the skin, nor does it cause stomach and intestinal distress. As a malarial suppressive it need be given only once a week, as compared to the daily doses needed for atabrine. SN-7618 will stop an attack of malaria in just 24 hours while atabrine does not usually prove effective in less than four to six days. In cases of falciparum malaria, a virulent, nonrelapsing and often fatal type, the new drug is reported as a cure.

While the new drug does not cure vivax malaria, the most common type and the one most often seen in the Pacific, it does abort the attacks of chills and fever. According to the Board for the Coordination of Malaria Studies, SN-7618 will relieve acute attacks of malaria three times faster than either quinine or atabrine.

But despite this apparent success there has been an announcement of still another antimalarial. This one may be even more successful for there is some indication that it will actually cure vivax malaria. No name has been released for this drug it being referred to merely as an 8-aminoquinoline. This drug is still under investigation because scientists want to be sure that there are no relapses for a sufficient length of time in order to term it a "cure."

Neither SN-7618, or the other antimalarial under study, has been released to the public, but the work continues and further reports may be expected in the fight against a disease that strikes three million persons each year throughout the world.

ONE
OPERATION
MADE EASY

Anything that saves a nurse time is a welcome help these busy days. And that very necessary little operation of keeping white shoes looking spotless is made easy with Mufti Shoe White, Liquid or Paste. Mufti Shoe White goes on easy, clings for hours. Stands a lot of brushing and touching up and so helps you enjoy longer time between shines. Always remember. Mufti Shoe White stays a long time bright. 10c and 25c.

MUFTI SHOE WHITE



not cur-
on type
in the
acks of
to the
of Ma-
relieve
ee times
or ata-

success
ment of
This one
sful for
t it will
ria. No
his drug
as an 8
is still
e scienc
here are
length o
ture."

The other
as been
the wor
orts may
against
million
out the

The **ANALGESIC FOR HOME USE...**



THE Bayer Laboratories at Rensselaer, N. Y., have specialized in the production of Aspirin for over forty-seven years. Only the finest and purest ingredients are used in its manufacture. Every batch made is subjected to complete and rigid scientific controls. Seventy different tests and inspections have been developed to insure the quality, purity and uniformity of the finished product.

BAYER ASPIRIN

"I've used it for years"

Recommend this reliable, cleansing, alkaline solution to your patients. Samples on request.

GLYCO-
THYMOLINE

KRESS & OWEN CO. - NEW YORK 7, N.Y.

Do new horizons beckon? Or, are you perhaps longing to return to familiar surroundings? North - South - East - West - Hawaii - Alaska - South America . . . all offer interesting opportunities well worth your while. Just register your name on our membership roll stating where you wish to go and when you will be available and regular bulletins containing details of every vacancy in your specialty will reach you promptly. Write today for a membership blank and complete information regarding this unique service.

(Strictly Confidential)

Aznoe's-Woodward
Medical Personnel Bureau

Ann Woodward, Director
30 N. Michigan Ave., Suite 607
Chicago 2, Illinois

Nutrition in Nursing

[Continued from page 33]

problems related to nutrition, made more intricate by nationalities, races and religious creeds. Very often education along dietary lines is a complicated and difficult task. One family may have eaten an almost exclusively carbohydrate diet for years and they cannot understand, nor do they like, the balanced diet that the physician has prescribed. The patient himself will be difficult to deal with, but, if the nurse is convinced of the importance of diet and knows the little tricks and subterfuges that can be employed to make it attractive, she is better qualified to do a job of "selling" good nutrition. Satisfaction in accomplishing a reform to better dietary habits is not the least return for thought and effort.

To the mother of a rachitic child the need for milk may be a foolish notion of "that nice girl from the public health." But with a bit of thought that "nice girl" can impart her own enthusiasm for a diet reform and at the same time pass on her knowledge of the hundred-and-one different ways to disguise the distasteful and rejected milk.

Don't make the mistake of believing that time spent in learning about diet and nutrition is wasted. Think of the knowledge you acquire in the same light as your education in *materia medica*. You do not feel qualified to administer medication without a knowledge of the drugs that you are to handle. So foods, harmless and even beneficial in the ordinary diet, can cause trouble, suffering or more

THE CASE OF THE OVERWASHED SPINACH



Spinach, as everybody knows, grows best in soft, rich soil. Usually, there is a fine dusting of grit hidden in the nooks and crannies of the leaves which must be removed before preparing spinach for Gerber's Baby Foods.

Our laboratory technicians found a loss in the mineral content when checking the newly washed spinach against the same spinach fresh from the fields. The loss was finally tracked down to the five or six washings we thought necessary to remove the grit.

From then on, a new technique was adopted which *shook* the leaves clean and required but *two washings*, with a consequent gain in mineral content.

That kind of care is typical of the way we at Gerber's take our responsibility of feeding America's babies. Working hand-in-hand with the medical profession, we agree that "Babies are the most important people!"

Write for free samples of Gerber's Cereal Food and Gerber's Strained Oatmeal, address Gerber's, Dept. 357-6, Fremont, Mich.



Gerber's Baby Foods

FREMONT, MICH.—OAKLAND, CAL.

CEREALS • STRAINED FOODS • CHOPPED FOODS



Gebauer's TANNIC SPRAY

The first "first-aid" for burns and sunburn. Always ready for immediate use. Just press lever on dispenseal bottle and spray. Soothing, cooling, effective.

THE GEBAUER CHEMICAL CO.
9315 St. Catherine Ave., Cleveland, O.

PERSONALIZED PROFESSIONAL SERVICE

Specializing in

WHITE UNIFORMS ONLY

Finest Poplins &
Washable Rayons



FREE CATALOGUE
ON REQUEST



Style No. 53
Size 11-46



NURSES

PERSONAL SERVICE

175 FIFTH AVENUE AT 23RD STREET
NEW YORK 10, N.Y.
Dept. RN 517

serious consequences, if they are administered without intelligent thought in specific cases.

A patient can never make up for the meal he fails to eat. Each food that is ordered, each dish that is a part of the whole dietary scheme, is just as important as the medication that you give so regularly. Once missed, the cumulative effect of the dietary is broken, or the necessary food elements contained by the meal are lost to a body that is fighting disease or injury.

Take a long range view of diet—and include everything that is necessary to make it effective. Diet is not a single meal, a daily menu, or even food for a month or a year. It represents all necessary factors to take care of today's maintenance, the needed energy for tasks of the moment, and provides health of hair, skin, nails, nerves, and vital processes. Ill persons require the normal amount for daily maintenance, plus extra fuel to fight infection or disease processes.

More and more physicians are inquiring into dietary habits of patients, even if the case they are treating is not a nutritional disease. Medical science has come to recognize the long-range effect of improper diet and the almost miraculous results that can be attained by simple changes in fare.

Nurses should, therefore, respect the science of nutrition for what it can and does accomplish. Because foods must be processed in one way or another, that too must be a part of the dietetic plan. To serve hot things hot, and cold things cold, will not change the fundamental value of a

are ad-
thought

up for
h food
at is a
eme, is
lication

Once
of the
cessary
the meal
ing dis-

f diet-
s neces-
is not a
or even
t repre-
ake care
needed
nt, and
a, nails,
persons
or daily
to fight

are in-
of pa-
re treat-
s. Medi-
nize the
er diet
results
simple

respect
what it
Because
one way
part of
t things
will not
ue of a



YOU'LL LOVE THIS NEW IMPROVED ARRID!

It's so wonderful for stopping
perspiration . . . and for
destroying odor! You'll see it for
yourself the first time you try it.
Do try a jar today!

No other deodorant

**stops perspiration and odor
so effectively yet so safely!**

It's the improved deodorant you've been waiting for! We believe no other deodorant of any sort . . . liquid or cream . . . meets the standard set by this wonderful new Postwar Arrid for stopping perspiration and odor with safety!

so safe . . . so gentle . . . so smooth and creamy!

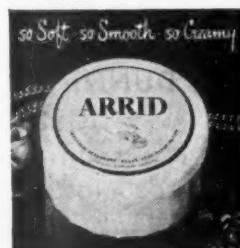
You'll love the smooth creaminess of this new, improved Arrid! And of course it's greaseless, stainless! Antiseptic, too! Get a jar today!

*All Postwar Arrid packages are marked with a star above the price.

NEW . . . POSTWAR ARRID . . .

**used by more nurses than any
other deodorant**

CARTER PRODUCTS INC., NEW YORK, N.Y.



For the FINER type of position to which your profession entitles you—register with the Dunne & Dunne Agency for immediate placement.

Listed below are just a few of the selective positions available.

We specialize in satisfactory placement for your particular needs.

SUPERINTENDENTS OF NURSES—54 bed hosp. Wyoming; 40 bed hosp. Oregon; 100 bed hosp. Northern Calif., good future, salary \$225 per month plus room & board.

SUPERVISORS—Maternity, medical unit, surgical unit, excellent salary—Northern Calif. Pediatrics, obstetrics, surgery—Idaho training school.

CERTIFIED ANESTHETISTS—HONOLULU—many—starting salary \$225 per month; Oral surgeon's office, Oregon; also positions in Alaska and Western States.

R.N.s for Alaska. 22 bed hospital. \$150 per month plus maintenance.

DIETITIAN—near San Francisco. 82 beds, central serving of trays. \$200 per month plus board, room and laundry.

X-RAY & LABORATORY TECHNICIAN—40 bed mining hosp. & clinic near Spokane. Salary \$175 to \$200 per month and maintenance.

R.N.—DOCTORS OFFICE—E.N.T. experience. Opportunity for young nurse to assist in surgery with new technique.

LABORATORY TECHNICIANS—Licensed preferred—Male and female. Openings in offices, hospitals and clinics. All starting salaries excellent.

ADDRESS ALL INQUIRIES TO JANE B. WELLS, R.N.

**DUNNE & DUNNE
AGENCY**
724 SOUTH SPRING ST.
LOS ANGELES 14, CALIF.

food. But if a hot food is lukewarm and unappealing, and in consequence the patient will not eat that food, then proper service *does* have a place in the science of nutrition. A neat, not too well-filled plate, will not alter the caloric value of the meal. But if the patient likes the appearance of the food and so eats what the plate contains, then that patient has been benefited to the full extent of the plate's contents.

Some women do not and will not like any phase of food service. But as a nurse it is necessary to give proper thought and consideration to diet, for diet is as vital as the medication, bed-baths, hypos and other procedures which go into the art of nursing. If you take time to see that the food eaten is the proper kind and the amount ordered, and that it is interesting and palatable, you have taken care of an important phase of your job. It isn't always easy, and sometimes it is a most thankless task. But, if you consider food in its true light and in all of the ramifications of preparation and service, your patient will bless you, and in the eyes of both patient and physician you will be a better nurse.

R.N. FANS: I have all issues back to August 1941 which I must dispose of since I am moving into an apartment and will have no storage space. The books are in good condition and I shall be glad to pass them on to someone who would enjoy having them. Please communicate with Thelma Snyder, Rt. No. 5, Gettysburg, Pa.

ke warm
sequence
od, then
place in
heat, not
alter the
t if the
of the
ate con-
on bene-
plate's

will not
. But as
proper
diet, for
on, bed-
cedures
suring. If
the food
and the
is inter-
taken
of your
1 some-
sk. But,
ue light
tions of
patient
of both
ill be a

es back
ust dis-
into an
storage
d condi-
ass them
joy hav-
tate with
Gettys-

"MOIST HEAT"

FOR

Pain, Swelling, Soreness

In the treatment of boils or other localized infections where "Moist Heat" is indicated, the "Moist Heat" of ANTIPIHLOGISTINE helps relieve pain, swelling, and soreness.

Applied comfortably hot, ANTIPIHLOGISTINE supplies "Moist Heat" for several hours. ANTIPIHLOGISTINE may be used with chemotherapy.

The "Moist Heat" of ANTIPIHLOGISTINE is also effective in relieving the pain and swelling of a sprain, bruise or similar injury or condition.



Formula: Chemically pure Glycerine 45.000%, Iodine 0.01%, Boric Acid 0.1%, Salicylic Acid 0.02%, Oil of Wintergreen 0.002%, Oil of Peppermint 0.002%, Oil of Eucalyptus 0.002%, Kaolin Dehydrated 54.864%.

**The Denver Chemical Mfg. Co., Inc.,
New York 13, N.Y.**

Antiphlogistine

Pruritic Torment is Often Worse Than Pain

MINUTES seem like hours to the ill or convalescent patient, nerve-racked by fiery, pruritic conditions.

Relief is urgent, and many nurses find in Resinol Ointment a bland, quick-acting emollient that fills the need admirably and wins the patient's gratitude.

With its 50 year background of helpful service, Resinol can

be used with confidence, even on tender, irritated parts. Does not interfere with curative therapy employed at the same time.

Resinol Soap is also a favorite in the sick room, because it is so mild, so agreeable and so distinctively refreshing.

To acquaint you with Resinol Ointment and Soap, a professional sample of both will be gladly sent on request. Write R. N. 40, Resinol Chemical Co., Baltimore, 1, Md.

1 1/4 oz. and
3 1/2 oz. jars

RESINOL

At all
druggists

Start for Norway

[Continued from page 28]

cause the organization had, along with forty-three other leading organizations, protested the German pillage and destruction. This left a nursing organization in fact but not in substance. The publication of the *Norwegian Journal of Nursing* had to be discontinued. How nurses kept up their own morale and inspired the students, under such conditions, is remarkable. Much of their spirit they attributed to being able to hear the B.B.C. broadcasts and the true course of events. This was, of course, done secretly and always at great risk.

The Norwegian Nurses' Association met soon after V-E Day, with the old board of directors again re-

suming their places. This was the first meeting in four years, the first official contact they had been able to have since the German occupation.

At their last meeting, November 1945, they took up the immediate problems of the existing professional salaries in relation to the costs of living, the pertinent question of registration of nurses, discussion of improving the facilities for postgraduate study, and what is to be done with the Norwegian war hospitals which are completely staffed by Norwegians who were caught on foreign soil, or escaped to carry on the fight. At present there are Norwegian hospitals maintained specifically for the care of Norwegians in England, Scotland, Canada, Iceland, and the United States. All of these will become important parts of proposed Norwegian health centers that the government plans to build all over the world.

Also last fall, the Northern Nurses' Association (which is composed of the Nursing Associations from Norway, Sweden, Finland, Denmark and Iceland) met for the first time in six years. Sister Bertha Helgestad, President of the Norwegian Nurses Association was elected chairman. These five countries whose problems are so similar, find mutual help and benefit in knowing what their sister nursing organizations are doing.

Next month they will meet in Oslo to discuss their work after a year of peace, and their plans for the future. If their efforts in peace are as strong as they were in war, this August conference will have a lot to review and a great deal to be proud of.

NURSECRAFT
UNIFORMS
Styled to
Professional
Taste

- ★ QUALITY FABRICS
- ★ QUALITY TAILORING DETAILS
- ★ LOW IN PRICE
- ★ UNEQUALLED IN VALUE

Free Write for copy of the latest
NURSECRAFT UNIFORM catalog - R

NURSECRAFT
UNIFORMS
120 East 59 St.
New York 22

Hay Fever Relief

begins in 10 minutes

with a simple 6 gr. tablet of
1/24 gr. ephedrine hydrochloride, NaCl,
NH₄Cl, KCl.

FOUR TABLETS of Nakamo Bell will
provide relief usually beginning within
ten minutes.

So many doctors are now prescribing and
dispensing Nakamo Bell and such favor-
able reports are being obtained—that we
want you to try it.

Check this tablet for yourself, and let
results convince you.

"Trial is proof"

SEND FOR SAMPLE

HOLLINGS-SMITH CO.
Orangeburg, N. Y.

RN 7-46

Sample Nakamo Bell, please.

Name R.N.

Address

Positions Available

To apply, write a separate application for each opening and address to correct box number, care of R.N.—A JOURNAL FOR NURSES, Rutherford, N. J. [R.N. does not conduct an employment service, but forwards your inquiries to placement bureaus and individual employers. Send no money with application. Bureaus requiring a fee will send you a bill.

ANSWER JOB ADVERTISEMENTS PROMPTLY!

***ADMINISTRATIVE DIETITIAN:** South. \$300 with partial maintenance for experienced member A.D.A.; must have B.S. degree in home economics and foods and nutrition; supervise 3 other dietitians. (Placement bureau charges \$2 registration fee.) Box SM7-1.

***ADMINISTRATIVE DIETITIAN:** Vicinity Atlanta, Ga. 300-bed hospital; 3 assistants; new nurses' home; \$3,600. (Placement bureau charges \$2 registration fee.) Box C-100.

***ANESTHETIST:** South. 125-bed hospital; \$3,840. (Placement bureau charges \$2 registration fee.) Box C-101.

***ANESTHETIST:** 250-bed hospital located in university medical center; \$200. maintenance. (Placement bureau charges \$2 registration fee.) Box MB7-1.

ANESTHETIST: East. Small general hospital in N.J. near Phila.; good opportunity. Apply: Box CG7-46.

***BACTERIOLOGIST:** Midwest. Degree or experience required; \$300, laundry. (Placement bureau charges \$2 registration fee.) Box SM7-2.

***CHIEF ADMITTING NURSE:** East. Duties principally administrative; include scheduling of all operations; 300-bed hospital; \$175, meals, laundry. (Placement bureau charges \$2 registration fee.) Box MB7-2.

***CHIEF ANESTHETIST:** Graduate of approved school; at least 5 years' experience as assistant in anesthesia; \$250; full maintenance; hospital insurance. (Placement bureau charges \$2 registration fee.) Box SM7-3.

***COLLEGE NURSE:** Midwest. Take charge of departments; direct health education program; \$2,700-\$3,000 for school term. (Placement bureau charges \$2 registration fee.) Box MB7-3.

DENTAL ASSISTANT: East. 40-hour week; good salary. Apply: Box JGA-46.

**Listed by placement bureaus.*

***DIRECTOR OF NURSES:** New York City. Unusual opportunity for well qualified individual; starting salary to \$4,200. (Placement bureau charges \$2 registration fee.) Box C-102.

EDUCATIONAL DIRECTOR: Virginia. For educational training school; present enrollment 70 students; maintenance, salary open. Apply: Box WM7-46.

***GENERAL DUTY NURSES:** Alaska. Two; general hospital in large city; \$208; rooms available at \$15 monthly. (Placement bureau charges \$2 registration fee.) Box MB7-4.

***GENERAL DUTY NURSES:** Alaska. \$150, maintenance; white and native patients; one day off a week; 8-hour duty; rotating system; transportation refunded at end of 18 months. (Placement bureau charges \$2 registration fee.) Box SM7-4.

GENERAL DUTY NURSES: Michigan. Full-time or part-time combined with university study; 8-hour day; 6-day week; 2 weeks sick pay; one month's paid vacation after year; \$180 to start; increases to \$192 at end of year; additional \$5 for evening or night duty. Apply: Director of Nursing, University of Michigan Hospital, Ann Arbor, Mich.

GENERAL DUTY NURSES: (25) Minnesota. To care for 100 veterans and other patients; 700-bed modern TB hospital; 8-hour day; 6-day week; \$175-\$185; \$37.50 deducted for full maintenance, if desired; vacation; sick leave; holidays; insurance and pension plans. Apply: Director of Nurses, Oak Terrace, Minn.

GENERAL DUTY NURSES: Midwest. 8-hour duty; good salary; full maintenance. Apply: Supt., Morris Memorial Hospital; Milton, West Va.

GENERAL DUTY NURSES: New England. 8-hour duty; 6-day week; start \$125. Apply: Directress of Nurses, Fairview Hospital, Great Barrington, Mass.

GENERAL DUTY NURSES: West. For floor

Have You Backache



due to Sagged Abdominal Organs?

When muscles weaken and organs sag a Spencer is helpful. It relieves backache and supports abdominal organs in position favorable to the doctor's treatment.

Postural Backache

The strain placed on back when the body is thrown off balance by faulty posture is also relieved by a Spencer.

Spencer Abdominal Supporting Belt designed especially for this woman. It supports the abdomen from below, upward and backward. Non-elastic. Instantly adjustable. Will not yield or slip under strain. The pull of supporting abdomen is placed on pelvic girdle, not on spine at or above lumbar region. Note Spencer Breast Support—also designed just for her.

The reason Spencer Supports are so effective is this: We create a support especially for you in which every line is individually designed to solve your problem. And you'll be amazed to find how little your Spencer will cost!

To receive booklet send coupon or look in telephone book for "Spencer corsetiere" or "Spencer Support Shop."

WRITE FOR FREE BOOKLET

SPENCER, INCORPORATED

Dept. N-2, 137 Derby Ave.,
New Haven 7, Conn.

Please send free booklet to

Name

Street

City & State 7-46

**SPENCER INDIVIDUALLY
DESIGNED SUPPORTS**
U.S. Pat. Off.
For Abdomen, Back and Breasts

and surgery; minimum \$175; afternoon and night duty \$10 extra. Also Ob. Supervisor, vacation-relief anesthetist. Apply: Director of Nurses, Roosevelt Hospital, Bremerton, Wash.

GENERAL DUTY NURSES: East. 8-hour duty; 6-day week; \$125-135; full maintenance. Apply: Director of Nurses, Princeton Hospital, Princeton, N.J.

GENERAL DUTY NURSES: Illinois. Also Anesthetist, Ob. and Nursery nurses; 2:30 to 11 P.M.; 11 to 7 A.M.; 100-bed hospital. Apply: Belmont Community Hospital Assn., Chicago 41, Ill.

GENERAL DUTY NURSES: East. \$120 days; \$135 nights; full maintenance; vacation; sick leave; retirement pension; annual increase \$100. Apply: Suffolk Sanatorium, Holtsville, L.I., N.Y.

GENERAL DUTY NURSES: East. 100-bed hospital; \$182; full maintenance at \$47; 8-hour day; 6-day week; vacation; sick leave. Apply: Box OCH7-46.

GENERAL DUTY NURSES: California. Three; 8-hour shifts; 6-day week; \$190; maintenance if desired; 35-bed general hospital; all-graduate staff; also require obstetrical nurse and anesthetist. Apply: Supt., Highland General Hospital, Auburn, Calif.

GENERAL DUTY NURSES: Iowa. 22-bed general hospital; 8-hour shifts; 6-day week; \$125; full maintenance. Apply: Osceola Hospital, Sibley, Iowa.

GENERAL DUTY NURSES: West. 250-bed hospital; medical, surgical, obstetrical, with or without experience; start \$175, raises to \$190. Also operating room nurses; minimum \$200; 2-weeks vacation with pay. Apply: St. Elizabeth School of Nursing, Yakima, Washington.

***HEAD NURSES:** Hawaii. For delivery and operating rooms; transportation refunded after year's service; \$210. (Placement bureau charges \$2 registration fee.) Box MB7-5.

INSTRUCTOR, NURSING ARTS: Colorado. Hospital has a building program to include all new classrooms and is located in Rocky Mountain resort area. Apply: Box CS-46.

*Listed by placement bureau.

***INSTRUCTOR, PEDIATRIC:** Middle west. Children's hospital; census 130 students; well-staffed hospital; \$225, laundry. (Placement bureau charges \$2 registration fee.) Box MB7-6.

***INSTRUCTOR, SCIENCE:** Middle west. Students sent to liberal arts college for basic science; \$225, maintenance. (Placement bureau charges \$2 registration fee.) Box MB7-7.

ISOLATION NURSES: Texas. For small unit of 85-bed hospital; isolation unit in separate building; good pay; excellent opportunity. Apply: Director of Nurses, Box 1182, Wichita Falls, Texas.

***MEDICAL SECRETARY:** Southwest. Busy clinic in large metropolis; \$3,600 start. (Placement bureau charges \$2 registration fee.) Box C-103.

OPERATING ROOM NURSE: Ohio. 75-bed hospital; salary depends upon experience; full maintenance, if desired. Apply: Ida Paugh, Supt. of Nurses, Doctors' Hospital, 1087 Denison Ave., Columbus, Ohio.

***ORTHOPTIC TECHNICIAN:** East. New, modern clinic needs three registered technicians; \$150. (Placement bureau charges \$2 registration fee.) Box SM7-5.

PUBLIC HEALTH STAFF NURSE: N.Y. \$1,800-\$2,000, based on ability and experience in public health. Apply: Executive Sec'y, American Red Cross, 162 Court St., Binghamton, N.Y.

PUBLIC HEALTH STAFF NURSE: N.Y. Private agency integrated with County Health Dept.; generalized program; education and experience required; \$2,100, car allowance. Apply: Nursing Committee Chairman, District Nursing Association, Inc., 105 Washington Avenue, Lawrence, Long Island.

SCHOOL NURSE: Missouri. Grade, junior high, and high schools; college degree; PHN certificate. Apply: Supt. of Schools, L. B. Hawthorne, Mexico, Missouri.

STAFF NURSES: Michigan. Exceptional opportunities in expanding modern hospitals; \$194.85 to start; advancement after 6 months and one year. Apply: Midland Hosp., Midland, Mich.

STAFF NURSES: California. Apply: Box SF7-46. [Turn the page]



DOO-TEE NURSERY SEAT

Designed to meet the training recommendations of nurses and pediatricians. Adjustable footrest aids in normal bowel evacuation. Or seat can be used on chamber so that infant plants feet firmly on floor. Duck deflector aids posture—prevents slumping forward and gives infant sense of security—something to hang on to. Sturdy. Sanitary finish. No folding devices to pinch baby's fingers.

Folder sent on request

CARLSON MFG. COMPANY
4440 BROADWAY OAKLAND II, CALIF.

00 ADHESIVE BANDAGES 1" x 3"

BAND-AID ADHESIVE BANDAGES

Johnson & Johnson

BREAK AT PERFORATION AND TEAR OFF
FOR DISPENSING

In the new
Wall-type Dispenser

- Tyrothrin cin, the amazingly effective topical antibiotic, is now incorporated in this newest Band-Aid Adhesive Bandage.

What's more, this compact, sterile adhesive compress is now available in the professional box which also serves as a handy wall dispenser. Just open at end and 100 adhesive bandages (1" x 3") are at your fingertips. Saves time—saves waste—gives extra protection.

ORDER FROM YOUR DEALER

Johnson & Johnson
NEW BRUNSWICK, N. J.
CHICAGO, ILL.

*BAND-AID is the Reg. Trade-mark of the adhesive bandage made exclusively by Johnson & Johnson.

Tyrothrin cin

IS THE BIG
BAND-AID*
NEWS!

See the improved Hygeia Nursing Unit

- Easy to clean.
- Fewer parts to handle . . . just bottle, nipple, and cap.
- When bottles are filled, only one movement to remove cap at feeding time.
- Sterilized cap makes handy container for baby's other foods.

CAP... Keeps nipples germ-free for storing or out-of-home feeding. Sterilized cap may be used for orange juice, cereals, etc.

NIPPLE... Famous breast-shaped nipple has a patented air vent to insure steady flow of formula and reduce "windsucking." Sanitary tab keeps nipple sterile when applying. You NEVER have to touch the feeding surfaces of nipple.

BOTTLE... Wide mouth — easy to clean — no funnel required for filling. Red measuring scale easy to read. Tapered shape makes it easier for baby to hold. Hygeia Nursing Bottle Co., Inc., Buffalo 9, N. Y.



HYGEIA NURSING BOTTLES NIPPLES WITH CAPS

Sold complete as illustrated, or parts separately

Sparkling Smart
STREET-FROCK STYLING
in a new
HOOVER UNIFORM

Charm, smartness and originality feature this very youthful princess style Hoover Uniform. Clever pointed set-on belt gives that slimming "nipped-in" waistline effect. Stunning notched convertible collar, squared shoulders, snow-white buttons and two pockets on the flared skirt. White Sunningdale broadcloth in coat style. Sizes 12 to 42.

STYLE No. 414 \$3.98 EACH
HOOVER UNIFORMS
251 W. 19th St., Dept. RN-7
New York 11, N. Y.

Hoover Uniforms, Dept. RN-7
251 W. 19th St., New York 11, N. Y.

Please send me ----- Style No. 414 Hoover Uniforms.

Sizes -----

Name -----

Address -----

City and Zone -----

State -----

STAFF NURSES: Texas. 500-bed general hospital connected with university medical school; 8-hour duty; 6-day week; \$175, laundry; evening and night duty \$180; vacation; sick leave. Apply: Director of Nursing Service, University of Texas Medical Branch, John Sealy Hosp., Galveston, Tex.

STAFF NURSES: Illinois. Also psychiatric nurses; good salaries; retirement, disability, and insurance plan. Apply: Public Welfare Department, State House, Springfield, Ill.

STAFF NURSES: West. Thirty-five; \$180-\$200; 2 meals; no room or laundry; \$10 bonus for evenings or nights. Apply: Director of Nurses, Multnomah Hospital, Portland, Ore.

STAFF NURSES: N.Y. Two; 21-bed hospital; \$125, full maintenance; increases. Apply: Supt., Canastota Memorial Hosp., Canastota, N.Y.

STAFF NURSES: East. Civil Service; vacation; sick pay; retirement plan if under 45; state hours and salary expected. Apply: Supt. of Nurses, Essex County Tuberculosis Sanatorium, Verona, N.J.

STAFF NURSES: Washington, D.C. vicinity. Public health experience preferred; car necessary; good salary; car allowance. Apply: Executive Director, Instructive Visiting Nurse Assn. of Arlington, 3150 Wilson Blvd., Arlington, Va.

STEWARDESS: For railroad run from Chicago or Cincinnati to the East; age requirements 22-27; several runs monthly; hotel accommodations provided; \$194.50. (Placement bureau charges \$2 registration fee.) Box MB7-8.

SUPERINTENDENT: Washington, D.C. Small convalescent home; pediatrics experience required; start \$2400. Apply: Mrs. Wm. Sturtevant, 86 Kalorama Circle, Washington 8, D.C.

SUPERINTENDENT: South. Small hospital; surgical nursing experience; own living quarters with private bath; take complete charge of hospital; \$250-\$400 with maintenance. (Placement bureau charges \$2 registration fee.) Box SM7-6.

SUPERINTENDENT: Idaho. Also general duty nurse. Well equipped, modern county hospital; 15-bed; salary open; full maintenance. Apply: Oneida Hosp., Malad, Idaho.

SUPERVISORS: Wisconsin. Two; generalized public health program; resort area; \$2,700-\$3,000; travel allowance \$500-\$750. (Placement bureau charges \$2 registration fee.) Box MB7-9.

SUPERVISORS: N.Y. Also head nurses and assistants for obstetrical, medical, surgical floors; average 26 beds; 8-hour duty; vacation, sick leave, holidays; \$185; live in or out. Obstetrical supervisors; PG work required; \$220; live in or out; \$5 bonus for night duty. Apply: Box BL7-46.

SUPERVISOR: Wisconsin. PHN degree desired; 2 staff nurses employed; good salary. Apply: Mrs. B. Fosse, Chairman V.N.A. Nursing Committee, 247 St. Lawrence Ave., Beloit, Wis.

(Turn the page)

*Listed by placement bureau

general
medical
5, laun-
cation;
ng Serv-
ch. John

psychiatric
isability,
Welfare
, Ill.

2; \$180-
10 bonus
ector of
d. Ore.

hospital;
Apply:
anastota,

e; vaca-
nd 45;
ly: Supt.
is Sana-

vicinity,
car nec-
Apply:
Visiting
on Blvd.

from Chi-
re require-
hotel ac-
placement
(ee.) Box

n. D.C.
es exper-
Mrs. Wm.
ashington

hospital;
n living
complete
h mainte-
\$2 regis-

o general
rn county
ll mainte-
Idaho.

: general
rt area:
\$500-\$750.
egistration

nurses and
l, surgical
; vacation
out. Ob-
required.
ight duty.

degree de-
ood salary
an V.N.A.
ence Ave.
the page

SUPERVISORS: Minn. Surgical and obstetrical; also general duty nurses; salary open; full maintenance; vacation; sick leave. Apply: Immanuel Hosp., Inc., Mankato, Minn.

SUPERVISORS: Ohio. Surgical, obstetrical, floor; also general duty nurses; new 26-bed hosp.; salaries open; full maintenance. Apply: Mrs. Wanda Gumm, Parkview Hosp., Toledo, Ohio.

SUPERVISOR: East. Private mental hospital near N.Y.; psychiatric experience unnecessary; excellent maintenance or live-out allowance. Apply: Box 12, Amityville, L.I., N.Y.

SUPERVISORS: Georgia. Also several staff positions. Large TB hospitals; 8-hour day; 48-hour week; chance for advancement; splendid salaries; attractive living quarters. Apply: Mrs. Eliz. C. Hood, Supt. of Nurses, Georgia State TB Sanatorium, Ga.

SUPERVISOR, NIGHT: New England. Also nursing school officer, assistant O.R. supervisor, and staff nurses. Grade A modern hospital connected with well-known clinic; good salary; pleasant working conditions; liberal benefits. Apply: Box NED-46.

SUPERVISOR, NIGHT: California. Large general hospital; \$2,700. (Placement bureau charges \$2 registration fee.) Box C-104.

SUPERVISOR, NIGHT: Mich. 7 P.M. to 7 A.M. with 4 hours off per night; \$160, full maintenance; or 11 P.M. to 7 A.M. \$145, maintenance. Also 2 staff nurses 3-11 P.M.; 2 for 11-7 shift; \$135, maintenance; 5% increase for all employees at end of year. Apply: Clinton Memorial Hosp. Assn., St. Johns, Mich.

SUPERVISOR, NIGHT: California. Also obstetrical nurses; 65-bed hospital; 8-hour duty; excellent salary and living conditions. Apply: Glendale Research Hosp., Glendale 6, Calif.

SUPERVISOR, OBSTETRICAL: Midwest. 350-bed hospital; \$200, maintenance. (Placement bureau charges \$2 registration fee.) Box MB7-10.

SUPERVISOR, OPERATING ROOM: N.Y. 8-hour day; 44-48 hour week; experience necessary; salary open. Apply: Directress of Nurses, Methodist Hosp., Bklyn. 15, N.Y.

SUPERVISOR, OPERATING ROOM: East. Vicinity Baltimore; \$200, maintenance. (Placement bureau charges \$2 registration fee.) Box MB7-11.

SUPERVISOR, OUTPATIENT: N.Y. Active dept. with 2 or 3 special clinics daily; develop teaching program; \$200-\$225. (Placement bureau charges \$2 registration fee.) Box MB7-12.

SUPERVISOR, PEDIATRIC: Virginia. 165-bed hospital; salary commensurate with qualifications. Apply: Director of Nurses, Alexandria Hosp., Alexandria, Va.

SURGICAL NURSE: Michigan. Assist certified surgeon and have complete charge of his surgery in small hosp.; \$3,000. (Placement bureau charges \$2 registration fee.) Box C-105.

XRAY AND LABORATORY TECHNICIAN: Mich. Salary open. Apply: Box CMH7-46.

*Listed by placement bureau.

Excellent Positions

OPEN IN

California and all Western States for Nurses, Instructors, Anesthetists, Dietitians, X-Ray and Laboratory Technicians, Administrators.

MEDICAL AND DENTAL AGENCY

7904 Santa Monica Blvd.
Hollywood 46, California

SALLIE TAYLOR, Director

Phone—Hillside 0211

SOMETHING NEW

has been added to our service! Now... all we need is a request from you asking for our BULLETIN SERVICE... a post card will do. Just write BULLETIN SERVICE, your name, address and occupation. You will receive by return mail a list of openings from which to choose that are really LIFETIME OPPORTUNITIES.

We can help you secure the position you want and in the location you prefer. Some of the classifications of these openings are: NURSES — LIBRARIANS — DIETITIANS — TECHNICIANS — EXECUTIVES — INSTRUCTORS — EDUCATIONAL DIRECTORS — SECRETARIES and all OFFICE PERSONNEL.

Write today... Say—
BULLETIN SERVICE ...

SHAY MEDICAL AGENCY
55 East Washington Street
Chicago 2, Ill.

Where to find our Advertisers

Alkalol Co., The	66	Johnson & Johnson	9, 21
Arrid	83	Junket Folks	21
Aznoe's-Woodward Medical Personnel Bureau	80	Kress & Owen	8
Baby Bathinette Corp.	68	Lavoris Co., The	7
Bayer Co., The	79	Leeming & Co., Thos.	Inside front cover
Becton, Dickinson & Co.	13	Linde Air Products Co., The	61
Beech-Nut Packing Co.	22	McKesson & Robbins, Inc.	95
Belmont Laboratories Co.	61	Medical Bureau, The	6
Bencone Uniforms, Inc.	70	Medical and Dental Agency	9
Bristol-Myers Co. 11, 77, Inside back cover	69	Mennen Co., The	53
Burroughs Wellcome & Co., Inc.	69	Mu-col Co., The	50
Business & Medical Registry	16	Mufti Shoe White	78
Camels	3	National Dairy Products Corp.	7
Campho-Phenique	6	N. W. Institute of Medical Technology	64
Carlson Mfg. Co.	90	Nursecraft Uniforms	86
Ciba Pharmaceutical Products, Inc.	75	Nurses Personal Service	82
Conti Products Corp.	58	Poloris Co., Inc.	5
Crookes Laboratories	76	Procter & Gamble	Back cover
Cutter Laboratories	2	Purdue Frederick Co., Inc.	73
Denver Chemical Mfg. Co., The	85	Q-Tips, Inc.	72
Dunne & Dunne Agency	84	Resinol Chemical Co.	8
Energine Shoe White	10	Reynolds Tobacco Co., R. J.	1
Ex-Lax, Inc.	20	R. N. Specialty Co.	12
Fresh	57	Schering & Glatz, Inc.	71
Gebauer Chemical Co., The	82	Scholl Mfg. Co.	51
General Bandages, Inc.	8	Sharp & Dohme, Inc.	96
Gerber Products Co.	81	Shay Medical Agency	93
Great A & P Tea Co.	63	Spencer, Inc.	8
Griffin Mfg. Co.	19	Tailby-Nason Co.	18
Hollings-Smith Co.	87	Tampax, Inc.	67
Hoover Mfg. & Sales Co.	92	U.S. Medical Specialty Co., Inc.	70
Hygeia Nursing Bottle Co., Inc.	92	Veto	14
		White Rock Uniform Co.	63
		Whitehall Pharmacal Co.	4, 17

Have you changed your address recently?

To be sure there is no interruption in the delivery of your copies of R.N., please return this coupon properly filled out. Address: R.N.—A JOURNAL FOR NURSES, Rutherford, N.J.

Name _____ (PLEASE PRINT)

Former address:

New address:

Street _____

Street _____

City & State _____

City & State _____

(Please use this coupon for address change only)

Have YOU heard what they say about YODORA?



THEY SAY: "It's a gentler cream deodorant . . . yet it gives lasting protection." (Yodora is made on a face cream base. Spreads on as easily, too.)

THEY SAY: "It's lovely . . . like a fine cosmetic." (Yodora stays creamy and soft. Never gets dry and grainy. It's delicately scented. No druggy odor!)



THEY SAY: "It's so *soothing!*" (Yodora contains no irritating metallic salts . . . it's actually soothing to normal skin. Can be used immediately after shaving.)

THEY SAY: "It won't harm fabrics." (Yodora has been pronounced chemically harmless to fabrics, by The Better Fabrics Testing Bureau.)

YODORA CREAM DEODORANT

"checks perspiration odor the SOOTHINGEST way"



McKesson & Robbins, Inc.
Bridgeport, Conn.



Pain of dysmenorrhea may be promptly relieved by 'RIONA' Capsules which combine the antispasmodic effect of 'Propadrine' hydrochloride and the analgesic effect of acetophenetidin and aspirin.

'RIONA'
Capsules

Sharp & Dohme, Box 7259, Philadelphia 1, Pa.

Gentlemen:

Without charge, please send me a clinical trial package of 'RIONA' Capsules.

Name _____

Street _____

City _____ State _____

RELIEF IN

Lumbago

Counterirritation has long been prescribed as a local treatment for lumbago. MINIT-RUB contains three ingredients widely known and used for their counterirritant or rubefacient action — Oil of Mustard, Menthol, Camphor.

Shortly after application, MINIT-RUB acts beneath the skin surface to improve local circulation by direct rubefaction. At the same time, by reflex action, it helps speed comforting warmth and relief to aching muscles.

To ease "between visit" pains, which often impede success in treating the condition itself, daily home-massage with MINIT-RUB is suggested. This helps the patient and serves to increase effectiveness of office treatments.

RECOMMEND SUPPLEMENTARY HOME-MASSAGE WITH MINIT-RUB
TO YOUR LUMBAGO PATIENTS

MINIT-RUB IS ALSO EFFECTIVE IN SIMPLE NEURALGIAS



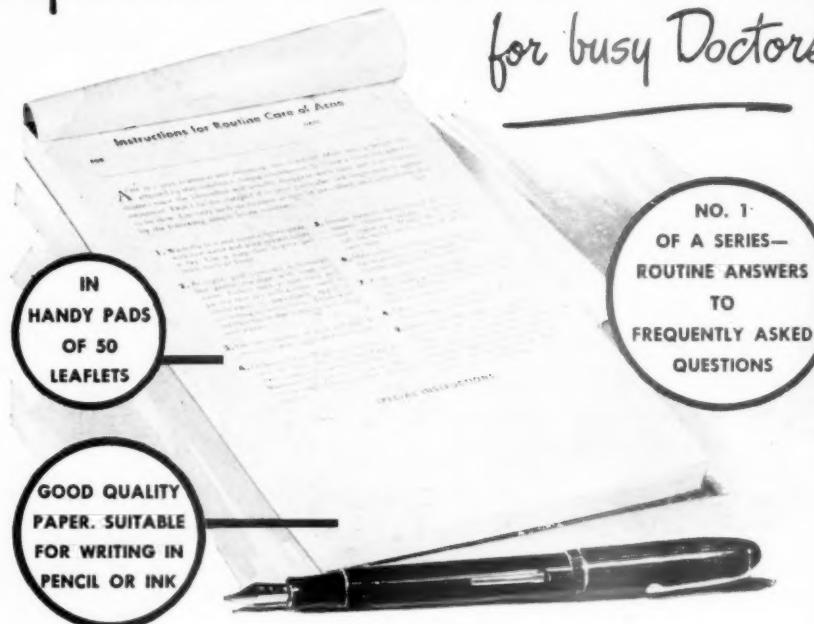
MINIT-RUB

THE MODERN RUB-IN

STAINLESS • GREASELESS • VANISHING

A Product of **BRISTOL-MYERS COMPANY**
19RN West 50th Street, New York 20, N.Y.

You should know about this new service for busy Doctors



THESE pads of leaflets were designed after conversations with many doctors regarding the type and form of material most useful to them. They contain nothing controversial—nothing designed to take the place of diagnosis. They are general in nature, short and to the point. And there is plenty of space on each page for your special written instructions.

The first leaflet in the series is "Instructions for Routine Care of Acne." It is bound in handy pads, easy to slip into a desk drawer.

IVORY SOAP, Dept. 6, Box 687, Cincinnati 1, Ohio
Please send, at no cost or obligation, handy pad of Number 1 leaflets, "Instructions for Routine Care of Acne."

99 44/100% Pure  It Floats

R. N.

ADDRESS _____

CITY _____ ZONE _____ STATE _____